# **CURRICULUM**

# Proficiency Certificate Level Ophthalmic Science

(Three Year's Programme – Yearly System)



Council for Technical and Vocational Training
Curriculum Development Division
Sanothimi, Bhaktapur
First Revision, 2010
Second Revision- 2018

# **Table of Contents**

Introduction	3
Curriculum Title	3
Aim	3
Program Objectives	3
Group Size	4
Entry Criteria	4
Duration	4
Medium of Instruction	4
Pattern of Attendance	4
Teacher and Student Ratio	4
Qualification of Teachers and Instructors	4
Instructional Media and Materials	5
Teaching Learning Methodologies	5
Mode of Education	5
Examination and Marking Scheme	5
Provision of Back Paper	6
Disciplinary and Ethical Requirements	<i>6</i>
Grading System	<i>6</i>
Certification and Degree Awards	7
Career Opportunity	7
First Year	10
Second Year	11
Ocular Anatomy and Physiology	12
Ocular Pharmacology and Pathology	16
Systemic Diseases and Eye	26
Ocular Disorders- I	30
Optics, Refraction and Binocular Vision	
Investigative Ophthalmology	47
Ocular Surgery	54
Community Ophthalmology- I	62
Third Year	65
Health Care Management	66
Ocular Disorder –II	75
Community Ophthalmology- II	78
Low Vision and Optical Dispensing	88
Clinical Practice –I	92
Clinical Practice- II	94
Clinical Practice –III	97

#### Introduction

Government of Nepal has called for the provision of basic health care for all citizens by establishing a network of services in rural and urban population of the country. The Council for Technical Education and Vocational Training (CTEVT) has been contributing towards the development of different level of health personnel in the country. In this context, CTEVT has planned to produce **Ophthalmic Assistant** (Allied Ophthalmic Personnel) with a view to provide comprehensive (preventive and promotive, curative and rehabilitative) eye health services to the community.

In the past, this cadre of human resource were used to certify through CTEVT/Skill test department and considered as a vocational training. This kind of certification though was catering the immediate need of eye care programme in the country, the trained ophthalmic assistant has limited horizon to grow and limited career ladder to upgrade themselves. This has contributed for the increasing demand of academic training which will allow them to grow further after completion of this certificate level course. In this context, the CTEVT started certificate level programme leading to degree 'Proficiency Certificate Level in Ophthalmic Science' to the candidates who successfully complete the requirements as prescribed by the CTEVT.

The trained Ophthalmic Assistant is a professional Ophthalmic Health Worker, who has been given three full years training in Ophthalmology and related health sciences. The aim of this three years training is to produce compassionate mid level ophthalmic human resource that can help and play important role in eye care delivery system within the hospital and in the community.

The graduates would be eligible for registration with the Nepal Health Professional Council in the category as mentioned in the Act of the Council. The registered graduates would be then eligible for the job at different level health institutions to the position as prescribed by the Public Service Commission or the concerned authority.

# **Curriculum Title**

Proficiency Certificate Level in Ophthalmic Science

#### **Aim**

The program aims to educate and train the quality middle level ophthalmic health personnel equipped with sound knowledge and skills of Ophthalmology along with general medicine.

# **Program Objectives**

After the completion of this program, the graduates will be enabled to:

- Acquire sound knowledge and perfect skills of Ophthalmology and general medicine.
- Demonstrate competency in identifying and resolving community health problems by applying Ophthalmic and modern procedure and medicines taking in consideration of nature of the diseases and condition of the patients.

- Demonstrate basic knowledge and clinical skills necessary to diagnose and initiate management of common ocular disorder.
- Exhibit leadership skills and professional characteristics and attitudes required as the role of ophthalmic health personnel or primary eye/health care manager.
- Demonstrate the necessary knowledge and skills to work in a variety of eye/health care settings.
- Promote Ophthalmology system of medicine with modern knowledge and skills.

# **Group Size**

The group size will be maximum of 40 (forty) students in a batch.

# **Entry Criteria**

- SLC Pass or SLC/SEE with minimum GPA 2.0 and C grade in Compulsory Mathematics, English & Science.
- TSLC in Ophthalmology, with minimum 67%.
- Should pass entrance examination as administered by CTEVT.

#### **Duration**

The total duration of this curricular program is three years. The program is based on yearly system. Moreover, one academic year consists of maximum of 39 academic weeks and one academic week consists of maximum 42 hours excluding evaluation period.

# **Medium of Instruction**

The medium of instruction will be in English and/or Nepali.

#### Pattern of Attendance

Minimum of 90% attendance in each subject is required to appear in the respective final examination.

# **Teacher and Student Ratio**

The ratio between teachers and students must be:

- Overall ratio of teacher and student must be 1:10 (at the institution level).
- 1:40 for theory and tutorial classes
- 1:10 for practical classes
- 1:5 for hospital duty
- Minimum of 75% of the teachers must be fulltime.

# **Qualification of Teachers and Instructors**

- The program coordinator must be a master degree holder in related field or M. Sc. in Ophthalmology degree holder with minimum of 3 years experience in teaching activities or services after completion of bachelor degree.
- The teacher must be a bachelor degree holder in related field.
- The demonstrator must have an intermediate level degree in related field with minimum of 2 years experience in teaching activities.

• The foundational subject related teacher should be master degree holder in the related area.

# **Instructional Media and Materials**

The following instructional media and materials are suggested for the effective instruction and demonstration.

- *Printed Media Materials* (assignment sheets, case studies, handouts, information sheets, individual training packets, procedure sheets, performance checklists, and textbooks).
- *Non-projected Media Materials* (display, models, flip chart, poster, writing board).
- Projected Media Materials (opaque projections, overhead transparencies, slides).
- Audio-Visual Materials (audiotapes, films, slide-tape programmes, videodiscs, videotapes).
- Computer-Based Instructional Materials (computer-based training, interactive video).

# **Teaching Learning Methodologies**

The methods of teachings for this curricular programme will be a combination of different approaches (not limited to as mentioned here) such as illustrated lecture, tutorial, group discussion, demonstration, simulation, guided practice, practical experiences, fieldwork, report writing, term paper presentation, community campaign, case analysis, role-playing, heuristic, project work and other independent learning.

**Theory:** Lecture, discussion, seminar, interaction, assignment, group work.

**Practical:** Demonstration, observation, guided practice, self-practice, project work, clinical practice.

# **Mode of Education**

There will be inductive and deductive mode of education.

# **Examination and Marking Scheme**

#### a. Internal assessment

- There will be a transparent/fair evaluation system for each subject both in theory and practical exposure.
- Each subject will have internal assessment at regular intervals and students will get the feedback about it.
- Weightage of theory and practical marks are mentioned in course structure.
- Continuous assessment format will be developed and applied by the evaluators for evaluating student's performance in the subjects related to the practical experience.

#### **b.** Final examination

- Weightage of theory and practical marks are mentioned in structure.
- Students must pass in all subjects both in theory and practical for certification. If a student becomes unable to succeed in any subject s/he will appear in the reexamination administered by CTEVT.
- Students will be allowed to appear in the final examination only after completing the internal assessment requirements.

## c. Requirement for final practical examination

- Professional of relevant subject instructor must evaluate final practical examinations.
- One evaluator in one setting can evaluate not more than 20 students.
- Practical examination should be administered in actual situation on relevant subject with the provision of at least one internal evaluator from the concerned or affiliating institute led by external evaluator nominated by CTEVT.
- Provision of re-examination will be as per CTEVT policy.

# d. Final practicum evaluation will be based on:

- Institutional practicum attendance 10%
- Logbook/Practicum book maintenance 10%
- Spot performance (assigned task/practicum performance/identification/arrangement preparation/measurement) 40%
- Viva voce:
  - Internal examiner 20%
  - External examiner 20%

Note: The evaluation and marking schemes for the subjects clinical and comprehensive field practice/study are mentioned separately in the respective sections of the curriculum.

#### e. Pass marks

• The students must secure minimum 40% marks in theory and 50% in practical. Moreover, the students must secure minimum pass marks in the internal assessment of each subject to appear final examination.

# **Provision of Back Paper**

There will be the provision of back paper but a student must pass all the subjects of all year within six years from the enrollment date; however there should be provision of chance exam for final year students as per CTEVT rules.

# **Disciplinary and Ethical Requirements**

- Intoxication, insubordination or rudeness to peers will result in immediate suspension followed by the review of the disciplinary review committee of the institute.
- Dishonesty in academic or practical activities will result in immediate suspension followed by administrative review, with possible expulsion.
- Illicit drug use, bearing arms in institute, threats or assaults to peers, faculty or staff will result in immediate suspension, followed by administrative review with possible expulsion.

# **Grading System**

The following grading system will be adopted:

• Distinction: 80% and above

• First division: 65% to below 80%

• Second division: 50 % to below 65%

• Pass division: Pass marks to Below 50%

# **Certification and Degree Awards**

- Students who have passed all the components of all subjects of all 3 years are considered to have successfully completed the course.
- Students who have successfully completed the course will be awarded with a degree of "Proficiency Certificate Level in Ophthalmic Science (Ophthalmology)".

# **Career Opportunity**

The graduates will be eligible for the position equivalent to Non-gazette 1<sup>st</sup> class/Level 5 (technical) as Health Worker of eye/ health institutions as prescribed by the Public Service Commission of Nepal and other related agencies. The graduate will be eligible for registration with Nepal Health Professional Council in the category as mentioned in the Act of the Council.

# **Course Structure of Certificate in Ophthalmic Science**

# **First Year**

			Mc	ode							
s	Subjects				7						
N	Subjects	т	P	Total Weekly Hours	Internal	Final	Exam Hour	Internal	Final	Exam Hour	Total Marks
1	English	3	0	3	20	80	3	-	-	-	100
2	Nepali	3	0	3	20	80	3	-	-	-	100
3	Social Studies	2	0	2	10	40	1.5	-	-	-	50
4	Anatomy & Physiology	4	1	5	20	60	3	10	10	3	100
5	Physics	4	2	6	20	60	3	10	10	3	100
6	Chemistry	4	2	6	20	60	3	10	10	3	100
7	Zoology	3	2	5	20	60	3	10	10	3	100
8	Botany	3	2	5	20	60	3	10	10	3	100
9	Mathematics & Statistics	4	1	5	20	60	3	10	10	3	100
	Total	30	10	40	170	560		60	60		850

# Second year

							Distributi	on of Marks	S		
S.	C. I. S. A.	M	Mode Total			Theory			Practical		Total
No.	Subjects	Т	P	- Weekly Hours	Internal	Final	Exam Hours	Internal	Final	Exam Hours	marks
1	Ocular Anatomy and Physiology	4	1	5	20	80	3	10	15	3	125
2	Ocular Pharmacology and Pathology	3	2	5	15	60	3	20	30	3	125
3	Systemic Diseases and Eye	4	0	4	20	80	3	0	0		100
4	Ocular Disorders- I	4	3	7	20	80	3	30	45	3	175
5	Optics, refraction and Binocular Vision	4	3	7	20	80	3	30	45	3	175
6	Investigative Ophthalmology	2	1	3	10	40	1.5	10	15	3	75
7	Ocular Surgery	4	1	5	20	80	3	10	15	3	125
8	Community Ophthalmology- I	3	1	4	15	60	3	10	15	3	100
	Total	28	12	40	140	560		120	180		1000

# Third year

					Distribution of Marks						
S.	S.		Mode		r	Theory		P	Total		
No.	Subjects	Т	P	Weekly Hours	Internal	Final	Exam Hours	Internal	Final	Exam Hours	marks
1	Health Care Management	2	1	3	10	40	1.5	10	15	3	75
2	Ocular Disorder- II	3		3	15	60	3	0	0		75
3	Community Ophthalmology- II	3	2	5	15	60	3	20	30	3	125
4	Low Vision and Optical Dispensing	2	1	3	10	40	1.5	10	15	3	75
5	Clinical Practice- I (Hospital Based)*		10	10				125	125		250
6	Clinical Practice- II (Hospital Based)*		10	10				125	125		250
7	Clinical Practice- III (Community Based)*		8	8				100	100		200
	Total	10	32	42	50	200		390	410		1050

# **First Year** (Please see separate curriculum for General Health Science First Year all)

# **Second Year**

- 1. Ocular Anatomy and Physiology
- 2. Ocular Pharmacology and Pathology
- 3. Systemic Diseases and Eye
- 4. Ocular Disorders-I
- 5. Optics, Refraction and Binocular Vision
- 6. Investigative Ophthalmology
- 7. Ocular Surgery
- 8. Community Ophthalmology-I

# **Ocular Anatomy and Physiology**

Total: 195 hrs Theory: 156 hrs Practical: 39 hrs

# **Course Description**

The course aims to make the students well versed with the basic knowledge of the anatomy and physiology of the eye. At completion of the course, the students should understand and also be able to explain about a normal eye. They should be able to identify the different structures within the eye and be able to explain their functions. They should be able to identify normal from abnormal ocular structures and find out the diseases leading to those abnormalities.

# **Course Objectives**

At the end of the course, the students will be able to:

- 1. Describe the of embryology of the eye, anatomy of eye lids and adnexa, conjunctiva, cornea, sclera, uveal tract, lens, vitreous humor and retina
- 2. Understand the physiology of cornea, aqueous humor, metabolism of cornea, lens and vitreous, and be able to describe it

# Reference text books

1. 'Anatomy and physiology of the eye' by A K Khurana- JP enterprises current edition

#### Reference book

- 1. 'Parson's diseases of the eye Ramanjit Sihota and Radhika Tandon- Elsevier '22<sup>nd</sup>edition
- 2. 'Clinical ophthalmology' by Bradbowling 8th edition

Unit 1: Anatomy	Theory: 105 hrs
Sub-unit 1.1: Ocular embryology	Theory: 10 hrs
Objectives:	Content:
<ol> <li>Understand basic embryology of eye in accordance with human embryo.</li> <li>Describe about three germinal layers in relation to eye.</li> <li>Describe development of different parts of eye in detail.</li> <li>Identify anomalies of development of different parts of eyes.</li> </ol>	<ol> <li>Human embryo and three germinal layers</li> <li>Development of retina and optic nerve</li> <li>Development of lens</li> <li>Development of sclera and cornea</li> <li>Development of uveal tract</li> <li>Development of vitreous</li> <li>Development of angle structure</li> </ol>
Evaluation methods: written exam, viva, performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated setting, supervised clinical practice

Sub-unit 1.2: Anatomy of eye ball, its content	Theory: 60 hrs
and visual pathways Objectives:	Content
1. Describe various planes and surfaces and anatomical terms of eye.  2. State the anatomy of following ocular structures along with their blood and nerve supply.   Conjunctiva Cornea Sclera Iris Ciliary body Choroid Lens Vitreous Retina Optic nerve Optic chiasm Visual cortex	<ol> <li>Content:         <ol> <li>Ocular planes, surface and terminologies.</li> <li>Anatomy of conjunctiva: parts, layers, blood supply, nerve supply</li> <li>Anatomy of cornea: parts, layers, blood supply, nerve supply</li> <li>Anatomy of sclera: parts, layers, blood supply, nerve supply</li> <li>Anatomy of iris: parts, layers, dilator pupillae and sphincter pupillae, blood supply, nerve supply</li> <li>Anatomy of ciliary body: parts, layers, ciliary muscles, blood supply, nerve supply</li> <li>Anatomy of choroid: parts, layers, blood supply, nerve supply</li> </ol> </li> <li>Anatomy of lens: parts, layers, blood supply, nerve supply</li> <li>Anatomy of vitreous: parts, layers, blood supply, nerve supply</li> <li>Anatomy of retina: parts, layers, blood supply, nerve supply</li> <li>Anatomy of optic nerve: parts, blood supply, nerve supply</li> <li>Anatomy of optic nerve: parts, blood supply, nerve supply</li> <li>Anatomy of optic chiasma and visual cortex: parts, layers, blood supply, nerve supply</li> </ol>
<b>Evaluation methods:</b> written exam, viva, performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated setting, supervised clinical practice
Sub-unit 1.3: Ocular adnexa	Theory: 35 hrs
Objectives:	Content:
<ol> <li>Explain the anatomy of the orbit and its walls</li> <li>Describe the anatomy of extra ocular muscles</li> <li>Describe the anatomy of intraocular muscles</li> <li>Enumerate the cranial nerves related to eye and describe their functions</li> <li>Describe the anatomy of eyelid and its</li> </ol>	<ol> <li>Gross anatomy of orbit: walls, margin, bones forming the walls, contents</li> <li>Anatomy of Superior and Inferior orbital fissure: boundaries and contents</li> <li>Origin, insertion, blood and nerve supply of extra ocular viz         <ol> <li>Orbicularis oculi</li> <li>Levator palpebrae superioris</li> <li>Superior rectus</li> </ol> </li> </ol>

	1 Infanta and
function 6. Describe the anatomy of lacrimal drainage system	<ul> <li>d. Inferior rectus</li> <li>e. Lateral rectus</li> <li>f. Medial rectus</li> <li>g. Superior oblique</li> <li>h. Inferior oblique</li> <li>4. Origin, insertion, blood and nerve supply of</li> </ul>
	intra ocular muscles a. Ciliary muscle b. Sphincter pupillae
	c. Dilator pupillae 5. Function of 2 <sup>nd</sup> , 3 <sup>rd</sup> , 4 <sup>th</sup> , 5 <sup>th</sup> 6 <sup>th</sup> and 7 <sup>th</sup> cranial
	<ul> <li>nerve and its relation to eye</li> <li>Eyelids: layers, parts, margin, glands, blood supply and nerve supply and function</li> <li>Lacrimal system: main and accessory lacrimal glands, excretory apparatus: puncta, canaliculi, lacrimal sac, nasolacrimal duct</li> </ul>
<b>Evaluation methods:</b> written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, practice in a simulated
performance observation in eliment setting	setting, supervised clinical practice
Unit 2: Ocular Physiology	Theory: 51 hrs
Sub-unit 2.1: Dynamics of aqueous humor	Theory: 16 hrs
Objectives:	Content:
<ol> <li>Describe the formation of aqueous humor</li> <li>Describe the functions of aqueous humor</li> <li>Describe the angle structures</li> </ol>	<ol> <li>Aqueous humor formation: site, mechanism of formation (secretion, diffusion, ultrafiltration)</li> <li>Function of aqueous humor</li> </ol>
4. Describe the drainage of aqueous humor	<ul><li>3. Angle structures: Schwalbe's line, trabecular meshwork, scleral spur, ciliary body band, root of iris</li><li>4. Drainage of aqueous humor: trabecular mesh work path way, uveoscleral pathway</li></ul>
Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, practice in a simulated setting, supervised clinical practice
Unit 2: Ocular physiology	
Sub-unit 2.2: Cornea and lens metabolism	Theory: 10 hrs
Objectives:	Content:
1. Explain the metabolism of cornea and lens	<ol> <li>Cornea metabolism: active site (endothelium and epithelium), carbohydrate metabolism (source: aqueous and tear film) aerobic and anaerobic pathway in brief.</li> <li>Lens metabolism: active site (anterior epithelium), carbohydrate metabolism (source: aqueous humor), anaerobic and aerobic pathway in brief.</li> </ol>
	3. Sorbitol pathway in brief.
Evaluation methods: written exam, viva,	3. Sorbitol pathway in brief.  Teaching / Learning Activities / Resources:

Sub-unit 2.3: Tear dynamics	Theory: 10 hrs					
Objectives:	Content:					
<ol> <li>Describe the formation of tears</li> <li>Describe the function of tears</li> <li>Describe the drainage of tears</li> </ol>	<ol> <li>Mechanism of tear production</li> <li>Layers of tear film, their production and their function</li> <li>Mechanism of tear drainage (Rosengren Doane theory)</li> </ol>					
Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:					
performance observation in clinical setting	classroom instruction, supervised clinical practice					
Sub-unit 2.4: visual pathway	Theory: 15 hrs Lab/practical: hrs					
Objectives:	Content:					
Describe the visual pathway	1. Visual pathway: course in brief					
2. Describe the pupillary pathway	2. Pupillary pathway: direct light reflex,					
3. Describe the near reflex	consensual light reflex, RAPD and its course in brief					
	3. Near reflex triad: miosis, accommodation and convergence (to list only)					
Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:					
performance observation in clinical setting	classroom instruction, supervised clinical practice					
Ocular anatomy practical	Lab/practical: 30 hrs					
Objectives:	Content:					
1. Identify different parts of eye and describe	1. Lids (3)					
anatomy of each part in brief.	2. Conjunctiva (3)					
	3. Cornea (3)					
	4. Sclera (3)					
	5. Aqueous humor (3)					
	6. Vitreous humor (3)					
	7. Iris and uveal tract (3)					
	8. Retina (3)					
	9. Optic nerve (3)					
	10. Extra ocular muscles (3)					
<b>Evaluation methods:</b> written exam, viva,	Teaching / Learning Activities / Resources: wet					
performance observation in clinical setting	lab, pigs eye/ goat eye, mannequin, model of eye,					
	photographs, classroom instruction, supervised					
Oculou physiology puo sticel (I : 14	clinical practice  Lab/practical: 9 hrs					
Ocular physiology practical (Light reflex)	Lab/practical: 9 lifs					
Objectives:	Content:					
1. Explain the pupillary pathway	1. Pupillary pathway:					
2. To demonstrate the procedure of direct,	Direct light reflex					
consensual light reflex and RAPD	RAPD Consensual light reflex					
Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:					
performance observation in clinical setting	classroom instruction, photograph, supervised					
r	clinical practice					
	ommon practice					

# **Ocular Pharmacology and Pathology**

Total: 195 hrs Theory: 117 hrs Practical: 78 hrs

# **Course Description**

The course provides basic concepts on pharmacology and pathology with special reference to eye. The students will acquire knowledge on the selection of appropriate drugs for specific diseases/conditions, their actions, indications, contraindications, and side effects and basic introduction to ocular pathology that deals about medical microbiology and hematology with special reference to eye.

# **Course objectives**

At the end of the course, the students will be able to:

- 1) Understand the specific action and the use of drugs on different body systems with special reference to eye.
- 2) Know the mechanism of action, indication, contraindication, adverse reactions of following drugs:
  - a) NSAIDS
  - b) Different ocular drugs
  - c) Antimicrobial drugs
  - d) Gastro intestinal drugs
  - e) Respiratory system drugs
  - f) Cardiovascular System drugs
  - g) Nutritional supplements
- 3) Describe different kinds of microorganisms related to human diseases.
- 4) Describe the formation and functions of different components of blood.
- 5) Perform basic microbiological, biochemical and hematological tests in the laboratory setting.

## **Recommended Texts**

- 1. Dr. Bharatmani Pokhrel. A Handbook of Clinical Microbiology, Gorakhnath Desktop Printing and Support, Kathmandu.
- 2. Gupta, Rajesh K. and Yadav Binod K., A Text book of Medical Laboratory Technology (Volume I and II), Samikshaya Books, Bagbazar, Kathmandu.
- 3. Chatterjee, K.D. 1981. Parasitology. Chatterjee Medical Publishers, Calcutta, India.

# **Reference Books**

- 1. Paniker, C.K. 1993. Textbook of Medical Parasitology, Jaypee Brothers Medical Publishers (P) Ltd., New Delhi, India.
- 2. Tripathi, K.D. 2010. Essentials of Medical Pharmacology, Jaypee Brothers Medical Publishers (P) Ltd., Newdelhi, India.
- 3. Pathak T.B. 2011. Medical Pharmacology and Pharmacy, Bidhyarthi Prakashan (P) Ltd., Kamalpokhari, Ktm.
- 4. Nepalese National Formulary (NNF) Department of drug Administration 2017
- 5. Martindale, The extra pharmacopoeia, 29<sup>th</sup> Edition

Part 1: Ocular Pharmacology	Hrs. theory: 59
Unit 1: Introduction to Pharmacology	Hrs. theory: 6
Objectives:	Content:
<ol> <li>Define pharmacological terminology.</li> <li>Identify half-life, plasma concentration of drug, bioavailability, shelf life, expiry date.</li> <li>Describe preventive measures to minimize Adverse Drug Reaction.</li> <li>Provide emergency management of Adverse Drug Reactions.</li> <li>Identify the importance of pharmacodynamics study.</li> <li>Explain the importance of pharmacokinetics study.</li> <li>Explain the routes of administration of drugs with reference to Ophthalmology.</li> </ol>	<ol> <li>Definition of pharmacology, pharmacodynamics, pharmacokinetics, pharmacy, drug, medicine, indication and contraindication.</li> <li>Adverse effects         <ol> <li>Definitions, classifications with examples. Define Side Effect</li> <li>Adverse Drug Reaction (ADR), classification and important manifestations</li> <li>Preventive measures of Adverse Drug Reaction.</li> </ol> </li> <li>Definition of pharmacokinetics and its importance         <ol> <li>absorption: definition, process, factors affecting absorption</li> <li>bio-availability: definition.</li> <li>distribution and penetration: placental barrier and blood brain barrier</li> <li>metabolism: definition,</li> <li>elimination of drug: list routes of drug elimination</li> </ol> </li> <li>Definition of pharmacodynamics and its importance: Definition and brief introduction to receptor theory of drug.</li> <li>Describe different routes of routes of administration of drugs (Local, Systemic and Ocular).</li> </ol>
Evaluation methods: written exam, viva	Teaching / Learning Activities & Resources: classroom instruction, handouts
Unit 2: Antimicrobial Agents	Hrs. Theory: 15
Objectives:	Content:
<ol> <li>Prescribe the drug therapy for bacterial diseases</li> <li>Select ideal anthelmintic and antiprotozoal drug and use it appropriately.</li> <li>Identify conditions requiring use of systemic antifungal</li> <li>Describe how to use acyclovir rationally.</li> <li>Select appropriate antiseptic and preservatives</li> </ol>	<ol> <li>Definition of: antibacterial, anthelmintic, antifungal, antiviral, antiseptic and preservatives.</li> <li>Definition and classification of antibiotics on the basis of mechanism of action and spectrum of activity.</li> <li>β-lactum antibiotic: Mechanism of action,</li> </ol>
and use of these agents rationally.	indication contraindication, side effects, precautions and dose of:

Penicillin: Ampicillin, Amoxycillin, Cloxacillin. Cephalosporin: Cefozolin, Cefixime, Cefadroxil 4. Macrolides: Mechanism of action. indication contraindication, side effects, precautions and dose of: Erythromycin, Azithromycin. 5. Tetracycline's: Mechanism of action, indication contraindication, side effects, precautions and dose of: Tetracycline and Doxycycline. 6. Chloramphenicol: Mechanism of action, indication contraindication, side effects, precautions and dose of Chloramphenicol. 7. Aminoglycosides: Mechanism of action, indication contraindication, side effects, precautions and dose of: Streptomycin, Gentamicin, Natamycin, Neomycin. 8. Floroquinolones: Mechanism of action, indication contraindication, side effects, precautions and dose of: Ciprofloxacin, Norfloxacin, Ofloxacin 9. Antihelminthic drugs: Mechanism of action, indication contraindication, side effects, precautions and dose of Albendazole and Mebendazole. 10. Antiprotozoal drugs: Mechanism of action, indication contraindication, side effects, precautions and dose of Metronidazole, Diloxanidefuroate. 11. Antifungal drugs: Mechanism of action, indication contraindication, side effects, precautions and dose of 12. Miconazole, Ketoconazole, Fluconazole and Clotrimazole. 13. Antiviral drugs: Mechanism of action, indication contraindication, side effects, precautions and dose of acyclovir. 14. Brief introduction of antiseptics and preservatives:Boric acid, zinc sulphate, benzalkonium chloride. Evaluation methods: written exam, viva **Teaching / Learning Activities & Resources:** classroom instruction, handouts

<b>Unit 3: Drugs used in Gastrointestinal Systems</b>	Hrs. theory: 4
Objectives:	Content:
<ol> <li>Prescribe drug therapy for peptic ulcer rationally.</li> <li>List ideal antispasmodic drugs and use it rationally.</li> <li>Choose and use laxative according to guideline and can explain contraindication.</li> <li>List antimotility drugs and their disadvantages on therapy of diarrhea.</li> <li>Select the ideal drugs for constipation.</li> </ol>	1. Drugs used in peptic ulcer disease: Mechanism of action, indication contraindication, side effects, precautions and dose of Ranitidine, Pantoprazole, Aluminium hydroxide and Sucralfate. 2. Antispasmodics: Mechanism of action, indication contraindication, side effects, precautions and dose of Hyoscine, Dicyclomine. 3. Antimotility drugs: Definition, brief description and therapeutic use of Loperamide and Oral Rehydration Solution. 4. Laxatives and Purgatives: Definition and
Evaluation methods: written exam, viva	therapeutic uses of Bisacodyl, Lactulose.  Teaching / Learning Activities & Resources:
TINA December 1	classroom instruction, handouts.
Unit 4: Drugs used in common respiratory	Hrs. theory: 2
Systems	Contont
Objectives:  1. Select ideal bronchodilator and describe its	Content:
	Drugs used in Asthma and COPD:
therapeutic use on asthma, and Chronic	Mechanism of action, indication
Obstructive Pulmonary Disease (COPD).	contraindication, side effects, precautions
2. Identify dose & dosage form, Adverse Effect,	and dose of Salbutamol, Salmeterol,
Contraindication, Indication of bronchodilators	Theophylline, Tiotropium Bromide, Montelukast.
and manage ADR.  Evaluation methods: written exam, viva	
Evaluation methods. written exam, viva	Teaching / Learning Activities & Resources: classroom instruction, handouts.
Unit 5: NSAIDS and Steroidal Anti-	Hrs. theory: 2
inflammatory drugs	Hrs. meory: 2
Objectives:	Content:
1. Select and prescribe analgesics and antipyretics	1. Definition of pain, pyrexia and
rationally.	inflammation
2. Select and prescribe anti-inflammatory drugs	2. Analgesic, antipyretic and anti-
rationally.	inflammatory drugs: Mechanism of action,
3. Select ideal steroidal drugs appropriately.	indication contraindication, side effects,
4. Differentiate between steroidal and non-	precautions and dose of Ibuprofen,
steroidal anti-inflammatory drugs.	Flurbiprofen, Indomethacin, Diclofenac,
	Nepafenac, Ketorolac and Paracetamol.
	3. Steroidal Drugs: Mechanism of action, indication contraindication, side effects,
	precautions and dose of Hydrocortisone, Prednisolone, Batamethasone and Dexamethasone

Evaluation methods: written exam, viva	Teaching / Learning Activities & Resources:				
H.46 December 19 and 19 and 19	classroom instruction, handouts.				
Unit 6: Drugs used in cardiovascular systems	Hrs. theory: 6				
Objectives:  1. Identify the therapeutic uses of antihypertensive drugs.  2. Identify the rational use of antihyperlipidemic drugs.	1. Antihypertensive Drugs: Classification, Mechanism of action, indication contraindication, side effects, precautions and dose of Amlodipine, Atenolol, Losarton, Furosemide and Enalapril.  2. Anti-hyperlipidemic Drugs: Mechanism of action, indication contraindication, side effects, precautions and dose of Atorvastatin and Fenofibrate.				
Unit 7: Nutritional Supplements	Hrs. theory: 2				
Objectives:	Content:				
<ol> <li>Identify conditions for rational use of different vitamins.</li> <li>Select the vitamins rationally.</li> </ol>	Vitamins: Classification, Sources and Roles of commonly used water soluble and fat soluble vitamins: vitamin A, vitamin B-complex, vitamin C, vitamin E, vitamin B <sub>12</sub> .				
Evaluation methods: written exam, viva	Teaching / Learning Activities & Resources: classroom instruction, handouts.				
Unit 8: Hormones and related drugs	Hrs. theory: 1				
Objectives:	Content:				
Identify the rational use of drugs in Diabetes Mellitus.  Evaluation methods: written exam, viva	Mechanism of action, indication contraindication, side effects, precautions and dose of: Insulin, Metformin, Glimepiride, Gliclazide.  Teaching / Learning Activities & Resources:				
Evaluation inclineus. Written exam, viva	classroom instruction, handouts				
<b>Unit 9: Drugs used in Central Nervous System</b>	Hrs. theory 4				
Objectives:	Content:				
<ol> <li>Define and explain different types of CNS acting drugs.</li> <li>Explain clinical guidelines for use of sedatives and hypnotics.</li> </ol>	<ol> <li>Definition and examples of: sedative, hypnotic, anxiolytic, anticonvulsant, anti- parkinsonian, opiod analgesic, drug abuse, drug addiction and habituation.</li> <li>Mechanism of action, indication contraindication, side effects, precautions and dose of: Morphine, Diazepam, Levodopa.</li> </ol>				
Evaluation methods: written exam, viva	Teaching / Learning Activities & Resources: classroom instruction, handouts.				
Unit 10: Anti-histamines and Anti-allergics	Hrs. theory: 2				
Objectives:	Content:				
1. Identify and select the appropriate anti-histamine and anti-allergic drugs.	Antihistamines and antiallergics: Mechanism of action, indication, contraindication, side				

	effects, precautions and dose of Cetrizine,
	Fexofenadine, Chlorpheniramine, Sodium
	chromoglycate.
Evaluation methods: written exam, viva	Teaching / Learning Activities & Resources:
Evaluation methods. written exam, viva	classroom instruction, handouts.
Unit 11: Anesthetics	Hrs. theory: 4
	Content:
Objectives:	
1. Identify local and general anesthetic drugs.	1. Local anesthetics: Classification,
2. Describe the rational use of different local	Mechanism of action, indications,
anesthetic drugs.	contraindications, side effects, precautions
3. Describe the rational use of different general	and dose of Lignocaine, Tetracaine and
anesthetic drugs.	Procaine.
	2. General anesthetics: Classification,
	Mechanism of action, indications,
	contraindications, side effects, precautions
	and dose of Nitrous oxide, Halothane,
	Ketamine and Propofol.
<b>Evaluation methods:</b> written exam, viva	Teaching / Learning Activities & Resources:
	classroom instruction, handouts.
Unit 12: Mydriatics and Cycloplegics	Hrs. theory: 4
Objectives:	Content:
1. Select and Prescribe ideal mydriatics and	1. Definition of Mydriatics and Cycloplegics.
cycloplegics.	2. Mechanism of action, indications,
2. Explain therapeutic uses of mydriatics and	contraindication, side effects, precautions
cycloplegics.	and dose of Atropine, Homotropine,
	Scopolomone, Cyclopentolate,
	Tropicamide, Phenylephrine and
	Epinephrine.
Evaluation methods: written exam, viva	<b>Teaching / Learning Activities &amp; Resources:</b>
	classroom instruction, handouts.
Unit 13: Miotics and Anti-glaucoma drugs	Hrs. Theory: 4
Objectives:	Content:
1. List miotic drugs and select appropriate miotic	1. Miotics: Mechanism of action, indications,
drugs.	contraindications, side effects, precautions
2. Describe the therapeutic uses of miotic drugs.	and dose of Pilocarpine, Physostigmine,
3. Classify antiglaucoma drugs.	Neostigmine, Ergotamine, Dibenamine.
4. Select the ideal antiglaucoma drugs rationally.	2. Anti-glaucoma drugs: Classification,
	Mechanism of action, indications,
	contraindications, side effects, precautions
	and dose of Timolol, Betaxolol,
	Levobunolol, Carbachol, Brimonidine,
	Apraclonidine, Acetazolamide,
	Dorzolamide, Latanoprost, Travoprost and
	Mannitol.
Evaluation methods: written exam, viva	Teaching / Learning Activities & Resources:
	TAXABLE PROPERTY OF THE PROPER
Diametrical metrous, written exam, 114a	classroom instruction, handouts.

Un	it 14: Lubricating Agents:	Hrs. Theory: 2
	jectives	Content:
	Enlist commonly used Lubricating Agents.  Describe uses of Lubricating Agents.	Lubricating Agents: Brief introduction and therapeutic uses of Carboxy Methyl Cellulose, Ploy Vinyl Povidone and Poly Vinyl Alcohol.
Eva	aluation methods: written exam, viva	Teaching / Learning Activities & Resources: classroom instruction, handouts.
Un	it 15: Prescription	Hrs. Theory: 1
	jectives:	Content:
2.	Describe the parts of Prescription List of commonly used abbreviations in Prescription.	Prescription: Definition, Parts of Prescription and abbreviations used in Prescription.
Pai	rt II: Ocular Pathology	Hrs. Theory: 58
	it 1: General Introduction to Microbiology	Hrs. Theory: 3
	jectives:	Content:
2.	Describe the historical development of Microbiology.  Explain the scope and branches of Microbiology.	<ol> <li>Definition of Microbiology, Medical Microbiology.</li> <li>Historical development of Microbiology.</li> <li>Scope of Microbiology.</li> <li>Branch of Microbiology with special reference to Ophthalmic Science.</li> </ol>
Eva	aluation methods: written exam, viva	<b>Teaching / Learning Activities &amp; Resources:</b> classroom instruction, handouts.
Un	it 2: Ocular Bacteriology	Hrs. Theory: 15
	jectives:	Content:
1. 2. 3.	Describe the morphology of bacteria: True bacteria (cocci, bacilli), Filamentous bacteria, Spirochaetes, Mycoplasma, Chlamydiae and Rickettsiae.  List the normal flora of different body parts.  Describe bacterial growth and growth curve of	<ol> <li>Morphological classification, Structure of bacteria</li> <li>Anatomical location of bacteria.</li> <li>Bacterial growth characteristics, generation time and factors influencing bacterial growth.</li> </ol>
	bacteria.	4. Culture media and cultivation techniques of
4. 5.	Describe factors influencing bacterial growth. Explain bacterial culture and types of culture media.	<ul><li>bacteria.</li><li>5. Theory and procedure of Gram staining.</li><li>6. Antibiotic susceptibility testing.</li></ul>
6.	Explain the theory and procedure of Gram	7. Epidemiology, mode of infection, pathogenesis, laboratory diagnosis of
7. 8.	staining.  Describe methods for antibiotic susceptibility testing.  Tube dilution method.  Paper diffusion method.  Describe epidemiology, mode of infection,	Chlamydia trachomatis, Staphylococcus aureus, Neisseriagonorrhoeae.
	pathogenicity, laboratory diagnosis of Chlamydia trachomatis, Staphylococcus	

aureus and Neisseriagonorrhoeae	
Evaluation methods: written exam, viva	Teaching / Learning Activities & Resources:
	classroom instruction, handouts, Laboratory
	practice.
Unit 3: Ocular Virology	Hrs. Theory: 8
Objectives:	Content:
1. Describe the morphology of virus: Icosahedral,	1. Morphology of virus
Helical and Complex Symmetry.	2. Classification of virus
1. Classification of virus on the basis of: symmetry	3. Replication of virus in general
of nucleocapsid, genome, host specificity.	4. Cultivation of virus
2. Describe the replication of virus in general.	5. Epidemiology, mode of infection,
3. List the different methods (chick embryonated	pathogenesis, laboratory diagnosis of
egg, cell lines) of virus cultivation.	Adenovirus and Herpes-Simplex virus.
4. Describe epidemiology, mode of infection,	
pathogenicity, laboratory diagnosis of	
Adenovirus and Herpes-Simplex virus	
Evaluation methods: written exam, viva	<b>Teaching / Learning Activities &amp; Resources:</b>
	classroom instruction, handouts.
Unit 4: Ocular Mycology	Hrs. Theory 8
Objectives:	Content:
1. Describe the morphology of fungi: Yeast, mold	1. Morphology of fungi
and dimorphic fungi.	2. Classification of fungi on the basis of
2. Classify fungi on the basis of clinical	clinical importance.
importance: Superficial, cutaneous, sub-	3. Reproduction of fungi in brief.
cutaneous, systemic and opportunistic fungi.	4. Staining and culture of fungi.
3. Describe about reproduction in fungi: Sexual	5. Epidemiology, mode of infection,
and asexual methods in brief.	pathogenesis, laboratory diagnosis of
4. Explain the procedure of KOH mounting in	Candidaspp, Fusariumspp, Aspergillus
staining of fungal cells.	spp.
5. List the media used for culture of fungi.	SPP.
6. Describe epidemiology, mode of infection,	
pathogenicity, laboratory diagnosis of:	
Candidaspp, Fusariumspp, Aspergillus spp.	
Evaluation methods: written exam, viva	Teaching / Learning Activities & Resources:
Diameton monous withon cauli, viva	classroom instruction, handouts, Laboratory
	practice.
Unit 5: Ocular Parasitology	Hrs. Theory: 6
Objectives:	Content:
Describe the morphology of parasites (protozoa	Morphology of parasites: Protozoa and
and helminthes).	helminthes.
2. Classification of parasites.	2. Classification of parasites
3. Describe epidemiology, mode of infection,	3. Epidemiology, mode of infection,
pathogenicity, laboratory diagnosis of:	1
	pathogenesis, laboratory diagnosis of
Onchocerca volvulus, Loa loa and	Onchocerca volvulus, Loa loa and
Acanthamoeba spp.	Acanthamoebaspp.
<b>Evaluation methods:</b> written exam, viva	Teaching / Learning Activities & Resources:

	classroom instruction, handouts and
	Laboratory practice.
Unit 6: Hematology	Hrs. Theory: 8
Objectives:	Content:
1. Describe the general composition of blood.	1. Blood composition.
2. Describe types of blood cells with their	2. Types of blood cells.
function.	3. Structure of blood cells.
3. Describe the stages of formation of blood cell.	4. Functions of blood cells.
4. Describe total leucocyte count (TLC),	5. TLC, DLC with normal values.
Differential leucocyte count (DLC) with their normal values.	6. ESR test method with normal values.
5. Describe test method (Wintrobe method) and	
normal value of erythrocyte sedimentation rate	
(ESR) of blood.	
<b>Evaluation methods:</b> Written examination, viva,	Teaching / Learning Activities: Classroom
observation of performance in lab	instruction, textbook/reference book self-study,
	journals, laboratory practice
Unit 7: Sterilization and Disinfection	Hrs. Theory 10
Objectives:	Content:
1. Define sterilization and disinfection.	1. Physical methods of sterilization.
2. Differentiate between sterilization and	2. Chemical methods of sterilization.
disinfection.	3. Applications of physical and chemical
3. Describe physical methods of sterilization.	method of sterilization.
Moist heat (Steam under pressure and	
fractional sterilization)	
• Dry heat (Hot air sterilization, flaming,	
incineration)	
Radiation (x- rays, gamma rays, UV rays	
and infrared rays.)	
• Filtration.	
4. Describe chemical methods of sterilization	
(Phenols and phenolic compounds, Alcohols,	
Halogens, Heavy metals and their compounds,	
Formaldehyde, Glutaraldehyde, Ethylene oxide,	
β– propiolactone, Hydrogen peroxide)  5. Identify the usual materials to be sterilized by	
5. Identify the usual materials to be sterilized by each of the above methods of sterilization.	
each of the above methods of stermzation.	

Practical		
Hrs. Lab: 39		
Content:		
Measurement of temperature/ Pulse rate/ Respiration rate/ Blood pressure of human volunteers		
Preparation of drug profile of commonly used ocular drugs.		
Case studies on drugs used in ocular setting		
Learning the technique to handle and restrain mice		
Carry out the study on the effect of cholinergic and anticholinergic drugs on cabbit cornea		
Dose adjustment in hepatic disease, urinary disease, elderly patient, pregnancy and actation		
Hrs. lab: 39		
<ol> <li>Content:         <ol> <li>Handling techniques of different laboratory goods.</li> <li>Different – microbiological investigations.</li> <li>Microbiological media preparation.</li> <li>TLC and DLC of blood.</li> <li>Determine erythrocyte sedimentation rate (ESR).</li> <li>Aseptic techniques in the laboratory.</li> </ol> </li> </ol>		
Teaching / Learning Activities: Classroom instruction, textbook/reference book self-study, journals, laboratory practice,		
Classroo		

# Systemic Diseases and Eye

Total: 156 hrs Theory: 156 hrs Practical: 0 hrs

# **Course Description**

This course will provide the students with concepts and ideas of diseases in general medicine related to eye. The eye being involved with the various organ system and their diseases has to be dealt in a proper understanding of the pathogenesis and the diseases presentation in relation to the eye. Diseases like Diabetes Mellitus, Hypertension and Thyroid disorders are emerging as major Non communicable disorders hence understanding these diseases and its impact in the eye are of outmost importance to the health professional's knowledge and skills.

# **Course objectives**

At the end of the course, the students will be able to:

- 1. Explain the systemic diseases related to eye in relation to hypertension and its impact on eye
- 2. Explain about diabetes mellitus and it 's clinical impact on eye
- 3. Explain the thyroid disease and its impact on eye
- 4. Explain about the different connective tissue diseases and its impact on eye
- 5. Take the systemic history and finding the clinical systemic manifestation.
- 6. Make a great help to the students in making eye diagnosis of systemic diseases and for providing the available treatment, counseling and the needful referral to the higher centres.

# **Recommended Texts**

1. 'Anatomy and physiology of the eye' by A K Khurana- JP enterprisescurrent edition

# Reference books

- 1. 'Parson's diseases of the eye Ramanjit Sihota and Radhika Tandon- Elsevier'22<sup>nd</sup>edition
- 2. 'Clinical ophthalmology' by Brad bowling8th edition

<b>Unit 1: Diabetes Mellitus</b>		Theory: 42 hrs
Objectives:		Content:
<ol> <li>2.</li> <li>3.</li> <li>4.</li> </ol>	Determine the prevalence, risk factors, clinical features, systemic complications and outline of management of diabetes Assess the prevalence, pathogenesis, risk factors, classification and management of diabetic retinopathy Diagnose diabetic retinopathy using various techniques.	<ol> <li>Definition of diabetes</li> <li>Prevalence of diabetes</li> <li>Risk factors and clinical features of diabetes</li> <li>Complications and management of diabetes</li> <li>Prevalence of diabetic retinopathy</li> <li>Pathogenesis and risk factors of diabetic retinopathy</li> <li>Clinical features of diabetic retinopathy</li> <li>Classification of diabetic retinopathy</li> <li>Management of diabetic retinopathy</li> </ol>
	raluation methods: written exam, viva,	Teaching / Learning Activities / Resources:
pe	rformance observation in clinical setting	classroom instruction, practice in a simulated setting,
H	nit 2: Hypertension	supervised clinical practice Theory: 31 hrs
	ojectives:	Content:
	Determine the prevalence, risk factors,	1. Definition of hypertension
	clinical features, systemic complications	2. Prevalence of hypertension
	and outline of management of	3. Risk factors and clinical features of
	Hypertension.	hypertension
2.	Assess the prevalence, pathogenesis, risk	4. Complications and management of hypertension
	factors, classification and management of	5. Prevalence of hypertension retinopathy
	hypertensive retinopathy.	6. Pathogenesis and risk factors of hypertension
3.	Diagnose hypertensive retinopathy using	retinopathy
	various techniques.	7. Clinical features of hypertensive retinopathy
4.	4	
	Counsel the patients with hypertensive	8. Classification of hypertensive retinopathy
	Counsel the patients with hypertensive retinopathy.	
	Counsel the patients with hypertensive retinopathy.  Develop competency on counseling of	8. Classification of hypertensive retinopathy
	Counsel the patients with hypertensive retinopathy.  Develop competency on counseling of vision threatening retinopathy and referral	8. Classification of hypertensive retinopathy
5.	Counsel the patients with hypertensive retinopathy.  Develop competency on counseling of vision threatening retinopathy and referral of patients.	8. Classification of hypertensive retinopathy
5.	Counsel the patients with hypertensive retinopathy.  Develop competency on counseling of vision threatening retinopathy and referral of patients.  Diagnose hypertensive retinopathy using	8. Classification of hypertensive retinopathy
5.	Counsel the patients with hypertensive retinopathy.  Develop competency on counseling of vision threatening retinopathy and referral of patients.  Diagnose hypertensive retinopathy using direct ophthalmoscopy diabetic retinopathy	8. Classification of hypertensive retinopathy
<ul><li>5.</li><li>6.</li></ul>	Counsel the patients with hypertensive retinopathy.  Develop competency on counseling of vision threatening retinopathy and referral of patients.  Diagnose hypertensive retinopathy using direct ophthalmoscopy diabetic retinopathy using indirect ophthalmoscopy	8. Classification of hypertensive retinopathy
<ul><li>5.</li><li>6.</li></ul>	Counsel the patients with hypertensive retinopathy.  Develop competency on counseling of vision threatening retinopathy and referral of patients.  Diagnose hypertensive retinopathy using direct ophthalmoscopy diabetic retinopathy	8. Classification of hypertensive retinopathy

Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, practice in a simulated setting,
performance observation in emineur setting	supervised clinical practice
Unit 3: Thyroid eye disease	Theory: 31 hrs
Objectives:	Content:
Discuss about Thyroid gland and its	1. Introduction – Thyroid gland and its functions
functions.	2. Clinical features of Thyroid eye diseases
2. Discuss Thyroid eye diseases.	(Thyrotoxicosis).
3. Explain about ocular manifestations of	3. Investigations of Thyroid eye diseases.
Thyroid eye diseases (Thyrotoxicosis).	4. Treatment modalities of Thyroid eye diseases.
4. Discuss about different investigations	5. Complications of Thyroid eye diseases.
required for the diagnosis of Thyroid eye	6. Management of complications of Thyroid eye
diseases.	diseases.
5. Discuss different treatment modalities of	
Thyroid eye diseases.	
6. Discuss issues related to complications of	
Thyroid eye diseases and its management.	
<b>Evaluation methods:</b> written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, practice in a simulated setting,
	supervised clinical practice
Unit 4: Vitamin A deficiency	Theory: 21 hrs
Objectives:	Content:
1. Develop competency on clinical features,	1. Introduction : vitamin A deficiency
diagnosis, classification and initial	2. WHO classification of Vitamin A deficiency
management and counseling and referral	3. Pathogenesis in general and in relation to eye in
2. Discuss issues related to prevalence of	Vitamin A deficiency
Vitamin A deficiency	4. Clinical features- symptoms and signs of
3. Discuss key issues on pathogenesis and risk	Vitamin A deficiency
factors of Vitamin A deficiency	5. Initial management of vitamin A deficiency
4. Discuss the issues on clinical features of	6. Complications of vitamin A deficiency.
Vitamin A deficiency	7. Prevalence of Vitamin A deficiency
5. Discuss on classification of Vitamin A	8. Pathogenesis and risk factors of Vitamin A deficiency
<ul><li>deficiency</li><li>Discuss the issues in management of</li></ul>	9. Clinical features of Vitamin A deficiency
malnutrition and needful referral.	10. Classification of Vitamin A deficiency
7. Discuss key issues on pathogenesis and risk	11. Management of malnutrition and needful referral
factors of malnutrition	12. Pathogenesis and risk factors of malnutrition
8. Discuss the issues on clinical features of	13. Clinical features of malnutrition
malnutrition	14. Malnutrition : in brief
9. Discuss ocular issues in relation to	15. Management of multiple vitamin deficiency and
malnutrition.	malnutrition and needful referral.
10. Discuss the issues in management of	
multiple vitamin deficiency and	
malnutrition and needful referral.	

Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, practice in a simulated setting,
	supervised clinical practice
<b>Unit 5: Other systemic diseases</b>	Theory: 31 hrs
Objectives:	Content:
1.Develop clinical knowledge on the ocular	1. Introduction
manifestations of the following systemic	2. Pathogenesis in general and in relation to eye
diseases.	3. Clinical features- symptoms and signs
	4. Initial management
	5. Complications of the following listed disease
	6. Tuberculosis
	7. Leprosy
	8. Syphilis
	9. Gonorrhea
	10. Rubella
	11. Toxoplasmosis
	12. HIV/AIDS
Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, practice in a simulated setting,
	supervised clinical practice

# Ocular Disorders- I

Total: 273 hrs Theory: 156 hrs Practical: 117 hrs

# **Course Description**

This course provides to diagnose comprehend regarding the signs, symptoms and manage the eye disorders. It also gives skill and knowledge to perform a proper history taking and do the clinical examination, establish a diagnosis in diseases and provide the available treatment. Referral system and the competency for the referral will be obtained by the students by the end of the course. The course aims to provide the students the knowledge on common ocular disorders including the common congenital diseases, communicable conditions of the eye and also focuses on the upgrading of the knowledge on the emerging and important non communicable disease as, diabetes, hypertension, and thyroid related diseases. It also aims to give the preventive knowledge on the diseases like retinopathy of prematurity.

# **Course objectives**

At the end of the course, the students will be able to:

- 1. Diagnose and explain the ocular disorders and manage them and refer whenever necessary.
- 2. Perform the required history taking, clinical examination with the available resources and make the diagnosis.
- 3. Give the available treatment.
- 4. Focus on teaching the students the right time of the referral to the higher centers.

# **Recommended Texts**

1. 'Anatomy and physiology of the eye' by A K Khurana- JP enterprises current edition

# Reference book

- 1. 'Parson's diseases of the eye Ramanjit Sihota and Radhika Tandon- Elsevier'22<sup>nd</sup>edition
- 2. 'Clinical ophthalmology' by Brad bowling8th edition

Unit 1: Disease of lid and adenexa	Theory: 21 hrs	Lab/practical: 22 hrs	
Sub-unit 1.1: Congenital Anomalies and lid diseases			
Objectives:	Content:		
<ol> <li>List the common ocular congenital anomalies.</li> <li>Enumerate Describe the treatment modalities of the causes of eyelid edema.</li> <li>List the causes of eyelid inflammation</li> <li>Describe the symptoms and signs of blepharitis (anterior and posterior).</li> <li>Clinical findings of chalazion and internal hordeolum</li> <li>Describe the clinical features of stye.</li> <li>Discus the management and treatment of chalazion, internal hordeolum and stye.</li> <li>Clinical examination of eye lids and adenexa and description about the abnormalities in position of eye lashes and lid margin.</li> <li>List the causes of entropion upper and lower lid</li> <li>List the causes of ectropion upper and lower lid</li> <li>Mention the clinical features of entropion and ectropion.</li> <li>Mention the various modalities of surgical treatment of entropion and ectropion</li> <li>Describe the BLTR of entropion surgery.</li> <li>List the causes of symblepharon and ankyloblepharon.</li> <li>List the causes of lagophthalmos and describe the clinical features.</li> <li>List the causes of ptosis</li> <li>Mention the types and grading of ptosis</li> <li>Describe the symptoms and signs of ptosis.</li> <li>List the treatment of Ptosis and referral.</li> <li>Enumerate the different types of Eyelid tumours.</li> <li>List the classification of eyelid tumors</li> <li>Benign ( with examples)</li> <li>Discuss the clinical features of different types of benign and malignant tumours of eye lid.</li> </ol>	1. Congenital Anam I. List the cong II. Enumerate the following cong 2. State the clinical fredema of eyelids 3. Inflammatory disconsisted in the process of the clinical feature in the following of the clinical feature in the process of the proce	genital anomalies. The clinical features of ongenital anomalies: Teatures and treatment of orders: Tes of Blepharitis Tes of Chalazion Todalities of Chalazion. Tes of Internal Tes of Stye Todalities of Stye. Tes and treatment of Contagiosum The contagiosum The contagiosum The aron Tous The contagiosum The aron The aron The contagiosum The aron The aron The contagiosum The aron The contagiosum The aron The contagiosum The aron The contagiosum The aron The aron The contagiosum The aron The	

Evaluation methods: written exam, viva,	Teaching / Learning Activities /
performance observation in clinical setting	<b>Resources:</b> classroom instruction, practice in
	a simulated setting, supervised clinical
	practice
Unit 1: Disease of Lid and Adenexa	
Sub-unit 1.2: Orbit	
Objectives:	Content:
1. Define Preseptal cellulitis and Mention the	1. Definition of Pre -septal cellulitis.
causes of Preseptal cellulitis.	2. Causes of Pre-septal cellulitis.
2. Describe the symptoms and signs of Preseptal	3. Symptoms and signs of Pre-septal
cellulitis.	cellulitis.
3. Describe the treatment modalities of Pre septal	4. Treatment modalities of Pre- septal
cellulitis.	cellulitis.
4. Define Orbital cellulitis.	5. Definition of Orbital cellulitis.
5. Mention the causes of orbital cellulitis.	6. Causes of orbital cellulitis.
6. Describe the symptoms and signs of orbital	7. Symptoms and signs of orbital cellulitis.
cellulitis.	8. Treatment modalities of Orbital
7. Describe the treatment modalities of Orbital	cellulitis
cellulitis	9. Introduction, clinical features and initial
8. Introduction, clinical features and initial	management of Cavernous sinus
management of Cavernous sinus thrombosis.	thrombosis.
9. Immediate referral of Orbital cellulitis and	10. Referral of Orbital cellulitis and
Cavernous sinus thrombosis to higher center.	Cavernous sinus thrombosis to higher
10. Definition and classification of Proptosis.	center
11. Describe the causes of Proptosis.	11. Definition and classification of
12. Describe the symptoms and signs of Proptosis.	Proptosis.
13. Describe the management of Proptosis.	12. Causes of Proptosis.
14. Indications of referral for cases of Proptosis.	13. Symptoms and signs of Proptosis.
15. List the different types of Congenital anomalies	14. Management of Proptosis.
of Orbit.	15. Referral for cases of Proptosis
16. Enlist the causes of congenital anomalies of	16. Different types of Congenital anomalies
orbit.	of Orbit
17. Describe the symptoms and signs of congenital	(Anophthalmos, Microphthalmos,
anomalies of orbit.	Enophthalmos)
18. Immediate referral of congenital anomalies of	17. Causes of congenital anomalies of orbit.
Orbit to higher center.	18. Symptoms and signs of congenital anomalies of orbit.
Evaluation methods: written exam, viva,	Teaching / Learning Activities /
performance observation in clinical setting	Resources: classroom instruction, practice in
personnance observation in eliment betting	a simulated setting, supervised clinical
	practice

Unit 1: Lid and Adenexa		
Sub-unit 1.3 : Lacrimal Drainage System		
Objectives:	Content:	
<ol> <li>List the causes of Watering and dry eyes.</li> <li>Describe the clinical evaluation for the diagnosis of watering and dry eyes.</li> <li>Define Dacryocystitis.</li> <li>Describe the causes of Dacryocystitis.</li> <li>Describe the clinical features of Dacryocystitis.</li> <li>Describe the treatment modalities of dacryocystitis.</li> <li>Define Dacryoadenitis.</li> <li>Describe the causes of Dacryoadenitis.</li> <li>Describe the clinical features of Dacryoadenitis.</li> <li>Describe the treatment modalities of Dacryoadenitis.</li> </ol>	<ol> <li>Diseases of Lacrimal apparatus</li> <li>Causes of Watering and dry eyes.</li> <li>Clinical evaluation for the diagnosis of watering and dry eyes.</li> <li>Definition of Dacryocystitis.</li> <li>Causes of Dacryocystitis.</li> <li>Clinical features of Dacryocystitis.</li> <li>Treatment modalities of dacryocystitis.</li> <li>Definition of Dacryoadenitis.</li> <li>Clinical features of Dacryoadenitis.</li> <li>Clinical features of Dacryoadenitis.</li> <li>Clinical features of Dacryoadenitis.</li> <li>Definition, Causes, clinical features and</li> </ol>	
Evaluation methods: written exam, viva, performance observation in clinical setting	treatment of Canaliculitis.  Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated setting, supervised clinical practice	
Unit: 2 Disease of Conjunctiva Objectives:	Theory: 18 hrs   Lab/practical: 10 hrs   Content:	
Conjunctivitis.  1. List the different classification of conjunctivitis with the examples.  2. Describe the symptoms of conjunctivitis:  a. Viral  b. Bacterial  c. Allergic  d. Prtozoal  3. Describe the signs on the basis of torch light and slit lamp examination.  4. Enumerate the treatment modalities of different types of conjunctivitis.  5. Indication and details of the conjunctival swab collection method.  6. Attain the competency to decide the resolving conjunctivitis and deteriorating conjunctivitis with reference to the referral to higher centres.  7. Perform the clinical examination to make the diagnosis of allergic conjunctivitis  8. Outline the treatment measures of allergic conjunctivitis.  9. List out the degenerative conditions of	<ul> <li>Inflammations of conjunctiva</li> <li>Definition of conjunctivitis</li> <li>Clinical features of different types of conjunctivitis</li> <li>Clinical features of the membranous and pseudomembranous conjunctivitis.</li> <li>Treatment of conjunctivitis.</li> <li>Complications of conjunctivitis.</li> <li>Different types of procedures to performed to make the diagnosis of conjunctivitis.</li> <li>Prevention of communication of acute conjunctivitis.</li> <li>Definition of Ophthalmia neonatorum</li> <li>Symptoms and signs of Ophthalmia neonatorum.</li> <li>Management of Ophthalmia neonatorum along with the investigations</li> <li>Define allergic conjunctivitis</li> </ul>	

10 M ( 1 116 )	
10. Mention the risk factors and treatment	conjunctivitis
modalities of Pinguecula.	Risk factors to allergic conjunctivitis
11. Definition of Pterygium.	Treatment of allergic conjunctivitis
12. Describe different types of Pterygium.	• Preventive measures for the disease.
13. Outline the grading of pterygium.	
<ul><li>14. Describe the pathogenesis of pterygium</li><li>15. List the different treatment modalities</li></ul>	2. Degenerative conditions
16. Describe the pterygium surgery with	<ul> <li>Risk factors and treatment modalities of Pinguecula.</li> </ul>
conjunctival autograft.	Definition of Pterygium.
17. List out the complications of pterygium	• Different types of Pterygium.
	Risk factors of pterygium.
	Grading of pterygium.
	Pathogenesis of pterygium
	<ul> <li>Different treatment modalities</li> </ul>
	Complications of pterygium
	Clinical manifestation and treatment
	of concretion
	Clinical characteristics of different
	Symptomatic conditions :e.g.
	3. Cysts: list the different types of
	conjunctival cyst
	4. Enlist different Tumours of conjunctiva
	5 Classification of tumours of conjunctiva
Evaluation methods: written exam, viva,	Teaching /. Learning Activities /
performance observation in clinical setting	<b>Resources:</b> classroom instruction, practice in
	a simulated setting, supervised clinical
	practice
Unit 3: Cornea	Theory: 18 hrs   Lab/practical: 12 hrs
Objectives:	Content:
1. List the common corneal congenital anomalies.	1. Congenital anomalies
2. Describe the clinical features of different types	• Definition of Megalocornea and the
of congenital anomalies of cornea.	clinical characteristics
3. Outline the differential diagnosis of different	• Definition of Microcornea and the
congenital anomalies of cornea.	clinical characteristics
4. Mention the different causative organism of	• Definition of Cornea Plana and the
0.0000001.01000	l aliminal abandatanistics
corneal ulcer.  5. Classify the different cornel ulcer.	clinical characteristics
5. Classify the different cornel ulcer.	Definition of Congenital cloudy cornea
<ul><li>5. Classify the different cornel ulcer.</li><li>6. List out the risk factors of corneal ulcer</li></ul>	Definition of Congenital cloudy cornea and the clinical characteristics
<ul><li>5. Classify the different cornel ulcer.</li><li>6. List out the risk factors of corneal ulcer</li><li>7. Describe the clinical features of different</li></ul>	<ul> <li>Definition of Congenital cloudy cornea and the clinical characteristics</li> <li>Differential diagnosis of different</li> </ul>
<ul><li>5. Classify the different cornel ulcer.</li><li>6. List out the risk factors of corneal ulcer</li><li>7. Describe the clinical features of different corneal ulcer.</li></ul>	<ul> <li>Definition of Congenital cloudy cornea and the clinical characteristics</li> <li>Differential diagnosis of different congenital anomalies of cornea.</li> </ul>
<ol> <li>Classify the different cornel ulcer.</li> <li>List out the risk factors of corneal ulcer</li> <li>Describe the clinical features of different corneal ulcer.</li> <li>Explain the indications and describe the</li> </ol>	<ul> <li>Definition of Congenital cloudy cornea and the clinical characteristics</li> <li>Differential diagnosis of different congenital anomalies of cornea.</li> <li>Inflammations of the cornea</li> </ul>
<ul><li>5. Classify the different cornel ulcer.</li><li>6. List out the risk factors of corneal ulcer</li><li>7. Describe the clinical features of different corneal ulcer.</li><li>8. Explain the indications and describe the corneal scrapping method.</li></ul>	<ul> <li>Definition of Congenital cloudy cornea and the clinical characteristics</li> <li>Differential diagnosis of different congenital anomalies of cornea.</li> <li>Inflammations of the cornea</li> <li>Different causative organism of</li> </ul>
<ol> <li>Classify the different cornel ulcer.</li> <li>List out the risk factors of corneal ulcer</li> <li>Describe the clinical features of different corneal ulcer.</li> <li>Explain the indications and describe the corneal scrapping method.</li> <li>Discuss the management and treatment of</li> </ol>	<ul> <li>Definition of Congenital cloudy cornea and the clinical characteristics</li> <li>Differential diagnosis of different congenital anomalies of cornea.</li> <li>Inflammations of the cornea</li> <li>Different causative organism of bacterial corneal ulcer.</li> </ul>
<ul><li>5. Classify the different cornel ulcer.</li><li>6. List out the risk factors of corneal ulcer</li><li>7. Describe the clinical features of different corneal ulcer.</li><li>8. Explain the indications and describe the corneal scrapping method.</li></ul>	<ul> <li>Definition of Congenital cloudy cornea and the clinical characteristics</li> <li>Differential diagnosis of different congenital anomalies of cornea.</li> <li>Inflammations of the cornea</li> <li>Different causative organism of</li> </ul>

11. Give the definition of trachoma. corneal ulcer. 12. Mention the risk factors for trachoma • Different causative organism of fungal 13. Enlist the WHO classification of trachoma. corneal ulcer. 14. Treatment of trachoma according to the • Different causative organism of different grades of trachoma. protozoal corneal ulcer. **Evaluation methods:** written exam, viva, **Teaching / Learning Activities /** performance observation in clinical setting **Resources:** classroom instruction, practice in a simulated setting, supervised clinical practice **Unit 4: Lens and cataract** Theory: 23 hrs Lab/practical: 20 hrs **Objectives: Content:** 1. Congenital cataract: a. Clinical features of Congenital Define Cataract. 1. List the different classification of Cataract. 2. cataract Describe the pathogenesis of Cataract. b. Clinical features of Developmental Mention the various risk factors for cataract cataract development. c. Different treatment modalities 5. Describe the symptoms of different types of d. Vision rehabilitation in children Cataract. after surgery. Describe the signs of different types of 2. Acquired cataract: Cataract. a. Risk factors for cataract 7. Give the grading of nuclear sclerosis. development. 8. Classify the different congenital cataract b. Symptoms of different types of Mention different risk factors of congenital 9. Cataract. c. Signs of different types of cataract. 10. Mention the different types of Cataract Cataract. d. Grading of nuclear sclerosis surgery. 11. List the indications of Cataract surgery. e. Brief description different types of 12. Mention the different complications of Cataract surgery. 3. Indications of Cataract surgery. Cataract. 13. Mention the different complications of 4. Different complications of Cataract. 5. Different complications of Cataract Cataract surgery. 14. Develop the competency to decide the surgery. urgency of cataract surgery and its timely 6. Referral of patients with cataract 7. Different anomalies of lens position. referral. 8. Clinical features of anomalies of lens 15. Enlist the different anomalies of lens position. 16. Clinical features of anomalies of lens position position 17. Mention the different causes of anomalies of 9. Different causes of anomalies of lens lens position. position. 18. List the different congenital anomalies of lens. 10. Clinical features of congenital anomalies of lens: 11. Lens coloboma a. Lenticonus b. Lentiglobus c. Microspherophakia

<b>Evaluation methods:</b> written exam, viva, performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated setting, supervised clinical practice
Unit 5 : Iris and uveal tissue	Theory: 18 hrs Lab/practical: 10 hrs
Objectives:	Content:
<ol> <li>List the various congenital anomalies of iris.</li> <li>Describe the clinical features of:         <ul> <li>a. Polycoria</li> <li>b. Aniridia</li> <li>c. Persistent pupillary membrane</li> <li>d. Coloboma</li> <li>e. Corectopia</li> <li>f. Heterochromia of iris</li> </ul> </li> <li>Define Uveitis.</li> <li>List the classification of uveitis.</li> <li>Describe the clinical features of anterior intermediate and posterior uveitis.</li> <li>Outline the management of uveitis with investigative tools.</li> <li>Enlist the treatment</li> <li>counselling components and the referral system.</li> <li>Define endophthalmitis</li> <li>Outline the causes of endophthalmitis.</li> <li>Outline the causes of endophthalmitis</li> <li>Describe the clinical features of endophthalmitis.</li> <li>Define panophthalmitis.</li> <li>List the causes of panophthalmitis.</li> <li>Utiline the clinical features of panophthalmitis.</li> <li>Mention the differentiating factors between endophthalmitis and panophthalmitis.</li> </ol>	<ol> <li>Congenital anamolies         <ul> <li>a. Polycoria</li> <li>b. Aniridia</li> <li>c. Persistent pupillary membrane</li> <li>d. Coloboma</li> <li>e. Corectopia</li> <li>f. Heterochromia of iris</li> </ul> </li> <li>Definition of uveitis. Define</li> <li>Classification of uveitis in relation to anatomy.</li> <li>Clinical features of anterior, intermediate and posterior uveitis.</li> <li>Management of uveitis with investigative tools.</li> <li>Treatment of uveitis in brief.</li> <li>Counselling components and the referral system.</li> <li>Definitionof endophthalmitis.</li> <li>Classification of endophthalmitis.</li> <li>Organism causing endophthalmitis.</li> <li>Organism causing endophthalmitis.</li> <li>Treatment and management with the counseling of patients.</li> <li>Differences between endophthalmitis and panophthalmitis.</li> <li>Causes of panophthalmitis</li> <li>Clinical symptoms and signs of panophthalmitis.</li> <li>Treatment and management of</li> </ol>
Evaluation methods: written exam, viva, performance observation in clinical setting	panophthalmitis.  Teaching / Learning Activities / Resources: classroom instruction, supervised clinical practice

Unit 6: Glaucoma		Theory: 18 hrs Lab/practical: 13
1. 2. 3.	jectives:  Define glaucoma.  Classify different types of glaucoma  Mention the clinical features of congenital	hrs  Content:  1. Glaucoma: Congenital, open angle glaucoma and angle closure glaucoma  Definition of glaucoma
4. 5. 6. 7. 8. 9. 10.	glaucoma Mention the differential diagnosis of congenital glaucoma. List out the different surgery for congenital glaucoma. List the symptoms and signs of angle closure glaucoma. List the symptoms and signs of acute angle closure glaucoma and its management. Describe the clinical features of open angle glaucoma Mention the signs of open angle glaucoma.	<ul> <li>Definition of glaucoma.</li> <li>Clinical features of glaucoma.</li> <li>Enlist different Classification of glaucoma.</li> <li>Definition of ocular hypertention and its management.</li> <li>Etiology and pathogenesis of open angle glaucoma in brief.</li> <li>Pathogenesis of angle closure glaucoma in brief.</li> <li>Different investigations for the diagnosis of glaucoma.</li> <li>Clinical features of open angle glaucoma and the angle closure glaucoma.</li> <li>Treatment modalities of open angle and angle closure glaucoma</li> </ul>
	aluation methods: written exam, viva, formance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, supervised clinical practice

Uni	t 7: Retina and Optic nerve	Theor	y: 30 hrs	Lab/practical: 15 hrs
	o-unit 7.1: Diseases of Retina	•	-	•
Objectives:			nt:	
1.	List the congenital anomalies of retina.	1. Dis	eases of Retin	a
2.	Describe the clinical features of retinitis	>	Different cor	ngenital anomalies of
	pigmentosa.		retina.	
3.	Mention in brief about retinitis pigmentosa.	>	Symptoms an	nd signs of retinitis
4.	Counseling of patients with retinitis		pigmentosa.	
	pigmentosa,	>		attern of retinitis
5.	Describe the clinical features of		pigmentosa:	
	retinochoroidal coloboma.			n retinitis pigmentosa,
6.	Define central retinal venous occlusion and	>		ures of retino-choroidal
	branch retinal vein occlusion.		coloboma.	
7.	Mention the symptoms of reinal vein	>		al venous occlusion and
	occlusion: CRVO and BRVO.			al vein occlusion in brief.
8.	Mention the investigations in retinal vein occlusion.		Symptoms of CRVO and E	f retinal vein occlusion:
9.	Enlist the treatment of retinal vein occlusion.	>		ns in retinal vein
	Classify diabetic retinopathy.		occlusion.	ns in termat vem
	Describe the clinical features of different	<b>A</b>		retinal vein occlusion.
11.	grades of Diabetic retinopathy.			n of diabetic retinopathy.
12	Mention the different investigations used in the			cal features of different
12.	diagnosis and management of diabetic			es of Diabetic
	retinopathy.		_	opathy.
13.	Mention the different modalities of treatment			rent investigations used
	for diabetic retinopathy.			e diagnosis and
14.	Mention the criteria for the referral of diabetic			gement of diabetic
	patients to higher center.			opathy.
15.	Classify hypertensive retinopathy.	>	Different mo	odalities of treatment for
16.	Describe the different symptoms and sighs of		diabetic retin	nopathy
	hypertensive retinopathy.	>	Definition of	hypertensive
17.	Mention the treatment for hypertensive		retinopathy.	
	retinopathy.	>		nd signs of hypertensive
	Define Retinopathy of prematurity.		retinopathy.	
	Mention the risk factors of ROP.	>		or hypertensive
20.	Mention the treatment of ROP.		retinopathy.	
				f Retinopathy of
		_	prematurity.	( D O D
		<b>&gt;</b>	Risk factors	
			Treatment of	KUP.
Eva	Evaluation methods: written exam, viva,		ing / Learnin	g Activities /
performance observation in clinical setting				om instruction,
_	-	superv	rised clinical p	practice

<b>Sub unit 7.2: Retinal Detachment</b>	
Objectives:	Content:
1. Define retinal detachment.	1. Clinical features, investigation and
2. Classify different types of retinal of	
3. Describe the clinical features of re	tinal 2. Definition of Macular hole
detachment.	3. Symptoms and signs of Macular Hole.
4. Mention the treatment modalities	of retinal 4. Treatment modalities of Macular hole.
detachment.	5. Clinical features of CSCR.
5. Describe Macular hole and its cha	racteristics. 6. Investigations for CSCR.
6. Outline the treatment modalities of	f Macular 7. Treatment and Management of CSCR.
hole.	8. Causes of Macular edema.
7. Define Central serous chorioreting	pathy. 9. Investigations and treatment of Macular
8. Describe the clinical features of C	SCR. edema.
9. Mention the investigations of CSF	10. Definition of Age related macular
10. Mention the treatment of CSR.	degeneration.
11. Mention the causes of Macular ed	ema. 11. Risk factors of ARMD.
12. List the investigations and treatme	nt of 12. Types of ARMD.
Macular edema.	13. Clinical features of ARMD.
13. Define Age related macular degen	eration. 14. Investigations and management of ARMD.
14. Risk factors of ARMD.	15. Tumors of retina
15. Describe the clinical features of A	RMD. 16. Retinoblastoma: Introduction, Clinica
<ol><li>List the investigations and manage ARMD.</li></ol>	ement of presentation and diagnosis.
17. Csassify tumors of retina.	
18. Describe the clinical features of	
retinoblastoma.	
19. Describe the different modalities of	of treatment
of retinoblastoma.	
Evaluation methods: written exam, v	va, Teaching / Learning Activities / Resources:
performance observation in clinical ser	
•	practice
Unit 7: Retina and Optic nerve	***
Sub-unit 7.3 : Disc edema and optic	
Objectives:  1. Mention the causes of disc edema.	Content:  1. Causes of disc edema.
2. Mention the causes of papilledema	
3. List the causes of Optic neuritis.  4. Mantion the different Investigation	3. Causes of Optic neuritis.  4. Different Investigations and treatment of disc
4. Mention the different Investigation	<u>g</u>
treatment of disc edema and optic	neuritis. edema and optic neuritis.
Evaluation methods: written exam, v	iva, Teaching / Learning Activities / Resources:
performance observation in clinical set	
1	practice

Unit 8 : Strabismus and Amblyopia	Theory: 10 hrs Lab/practical: 15 hrs	S	
Objectives:	Content:		
<ol> <li>Define strabismus.</li> <li>Define binocular single vision</li> <li>Mention the prerequisites of BSV</li> <li>Describe about the anomalies of BSV</li> <li>Elaborate the abnormal retinal correspondence.</li> <li>Define suppression</li> <li>Define Amblyopia</li> <li>Enlist the Types of amblyopia</li> <li>Describe the causes of amblyopia</li> <li>Mention the treatment modalities of amblyopia.</li> </ol>	<ol> <li>Strabismus brief description</li> <li>Classification of strabismus.</li> <li>Definition of the binocular single vision</li> <li>Binocular single vision grading.</li> <li>Prerequisites of BSV in brief.</li> <li>Anomalies of BSV</li> <li>Abnormal retinal correspondence definition and brief description with example.</li> <li>Definition of suppression</li> <li>Suppression: Explanation with examples</li> <li>Definition of Amblyopia</li> <li>Different types of amblyopia: classification</li> <li>Causes of amblyopia</li> <li>Treatment modalities of amblyopia.</li> <li>Patching and penalization therapy in brief</li> <li>Patching and penalization therapy in amblyopia.</li> </ol>	n	
<b>Evaluation methods:</b> written exam, viva, performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, supervised clinical practi	ice	

# **Optics, Refraction and Binocular Vision**

Total: 273 hrs Theory: 156 hrs Practical: 117 hrs

### **Course Description**

The course aims to make the students to be familiar with the basic knowledge of the optics, refraction and binocular vision. The course will firstly focus on understanding of the light and its clinical implications. This knowledge will help to know the different optical condition of the eye. Once they are competent on the optics of the eye they will be educated on the techniques to measure refractive error and refine it.

The other part of the course provides knowledge on eye teaming and focusing to perceive the world in synchronized manner, how the eyes will behave once this harmony is disturbed. This knowledge will help them to identify different binocular vision abnormalities. This allows them to assist in the clinical management of the cases with binocular disorders.

## **Course Objectives**

At the end of the course, the students will be able to:

- 1. Understand the light and its properties
- 2. Explain the behavior of light in different media & abnormalities in the eyes related to the optics of the eyes
- 3. Know different refractive condition of the eye and assess them.
- 4. Understand accommodation and asses them
- 5. Understand different monocular and binocular abnormalities of the eye and work-up cases with binocular disorders

#### **Recommended Texts**

- 1. Practice of refraction, Duke Elder's, 10<sup>th</sup> edition
- 2. Theory of practice of optics and refraction, A K Khurana, 4<sup>th</sup> edition
- 3. Strabismus simplified, Pradip Sharma, 2<sup>nd</sup> edition
- 4. Theory Practice Squint and Orthoptics, A K Khurana

#### **Reference Books**

- 1. Clinical Optics, Troy E. Fanin, Theodore P. Grosvenor
- 2. Borish clinical refraction, 2<sup>nd</sup> edition
- 3. Clinical Visual optics, Ronald B Rabbetts, 4th edition
- 4. Binocular Vision and Ocular motility, Gunter K. Von Noorden, 6<sup>th</sup> edition

Unit 1 : Optics	Theory: 44 hrs Lab/practical: 38 hrs
Sub-unit 1.1 : Light, its nature and interaction	Theory: 20 hrs
with reflective &refractive medium	
Objectives:	Content:
1. Understand theories and nature of light	1. Introduction
2. Perform various experiments of light in optical	2. Wave and particle theory of light
bench.	3. Interference, Diffraction and Scattering
	4. Sign conventions for ray diagram and image
	formation
	5. Reflection in Plane and curved surface
	6. Refraction through plane and curved surface
	7. Reflection and refraction in eye
	8. Vergence through plus and minus lens
	9. Vergence change with distance
<b>Evaluation methods:</b> written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, practice in a simulated
77.4.4.0.4	setting, supervised clinical practice
Unit 1: Optics	T (1)
Sub-unit 1.2 : Cardinal points	Theory: 12 hrs
Objectives:	Content:
1. Understand about cardinal points in lens system	1. Introduction
2. Explain thick and thin lens and various lens	2. Importance in lens system
design	3. Introduction to thin and thick lens.
3. Understand the shchematic eye	4. Calculation of focal length using formulae in
4. Calculate the power of the lens	thin and thick lens.
	5. Introduction to gullstrand eye mode, simple eye
	and reduced eye with the defined parameters
	<ul><li>6. Lens designs options in minus and plus lens</li><li>7. Meniscus lens and its advantages</li></ul>
	8. Lenticular lens and myodiscs
Evaluation methods: written exam, viva,	· · · · · · · · · · · · · · · · · · ·
performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated
performance observation in crimical setting	setting, supervised clinical practice
Unit 1: Optics	setting, supervised crimical practice
Sub-unit 1.3 : Manufacturing of ophthalmic	Theory: 12 hrs
lenses	Theory. 12 ms
Objectives:	Content:
Understand about the lens Manufacturing	Manufacturing of glass lens
2. Describe the properties of ophthalmic lens	2. Manufacturing of thermosetting and
3. Describe lens aberrations	thermoplastic lens
4. Observe the lens manufacturing process	3. Properties of ophthalmic lens
Cosor to the fells manaracturing process	4. Usefulness of ophthalmic lenses in glass
	prescription
	5. Monochromatic aberration in lens
	6. Chromatic aberration in lens
	o. Chromade accitation in teno

<b>Evaluation methods:</b> written exam, viva, performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated
Unit 2: Refraction	setting, supervised clinical practice  Theory: 58 hrs Lab/practical: 29 hrs
Sub-unit 2.1 : Visual acuity and Refractive	Theory: 16 hrs
errors	Theory. To ms
Objectives:	Content:
<ol> <li>Understand Visual acuity and Vision charts</li> <li>Describe different types of Refractive error and presbyopia</li> <li>Perform Visual Acuity assessment</li> </ol>	<ol> <li>Introduction to visual acuity and concept behind VA</li> <li>Introduction to distance (Snellens and Log MAR) and near vision chart</li> <li>Notations for visual acuity recording</li> <li>Methods of VA recording in different age groupPinhole, principle and Uses</li> <li>Myopia and its classification based on etiology</li> <li>Hyperopia and its classification based on etiology</li> <li>Astigmatism and types of astigmatism</li> <li>Accommodation and its physiology</li> </ol>
	9. Introduction to presbyopia and its classification
Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, practice in a simulated setting, supervised clinical practice
Unit 2 : Refraction	setting, supervised crimical practice
Sub-unit 2.2 : Subjective and Objective	Theory: 20 hrs
refraction	
Objectives:	Content:
<ol> <li>Understand about procedure of subjective refraction and objective refraction</li> <li>Perform subjective and objective refraction</li> </ol>	<ol> <li>Parts of retinoscope, optical principle, reflex characteristics and procedure.</li> <li>Radical retinoscopy</li> <li>Introduction to objective refraction and its importance</li> <li>Keratometry, principle and procedure</li> <li>Autorefractometer, introduction and procedure</li> <li>Introduction to subjective refraction and its importance</li> <li>Procedures for Spherical power determination(JND, Schiener disc, Optometer)</li> <li>Procedures for cylindrical power and axis determination (staenopic slit, clock dial, astigmatic fan)</li> <li>Procedures for spherical power refinement (Fogging, Duochrome)</li> <li>Procedures for cylindrical power and axis refinement (Jackson cross cylinder)</li> </ol>

Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, supervised clinical practice
Unit 2 : Refraction	
Sub-unit 2.3 : Specifying lens power,	Theory: 10 hrs
Prescription Writing and power verification	
Objectives:	Content:
1. Understand the component of Ophthalmic lens	1. Introduction to Spherical lens and power
power	2. Introduction to Cylindrical lens and power
2. Calculate the power of different types of lens	3. Sphero-cylindrical lens and power
3. Write the prescription for ophthalmic lenses	4. Prescription writing and transposition
Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, supervised clinical practice
Unit 2: Refraction	
Sub-unit 2.4: Contact lens, contact lens solution and complication of contact lens	Theory: 12 hrs
Objectives:	Content:
Understand about contact lens, their fitting care and referral	Introduction to contact lens types, indication and contraindication
<ul><li>2. Observe the fitting of contact lenses and care.</li></ul>	2. Introduction to contact lens solution and it
2. Observe the fitting of contact lenses and care.	components
	3. Wearing modality in contact lens
	4. Common complications in Soft and Hard
	contact lens wear
	5. Referral criteria for contact lens fitting
Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, supervised clinical practice
Unit 3: Binocular Vision	Theory: 54 hrs Lab/practical: 50 hrs
Sub-unit 3.1: Extraocular muscles	Theory: 10 hrs
Objectives:	Content:
1. Understand the Function of EOM	1. Origin, insertion and nerve innervation
2. Perform various eye movement tests	2. Various laws for muscle action
	3. Primary, Secondary and Tertiary action of EOM
Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, supervised clinical practice
r	

Unit 3: Binocular Vision	
Sub-unit 3.2: Accommodation and convergence	Theory: 12 hrs
Objectives:	Content:
<ol> <li>Understand ocular accommodation and its anomalies</li> <li>Perform various tests for accommodative functions</li> </ol>	<ol> <li>Accommodation and its effect in ocular alignment</li> <li>Anomalies of accommodation</li> <li>Convergence and its effect in ocular alignment</li> <li>Convergence-divergence problems</li> <li>Basic tools and procedure for measuring convergence and accommodation problems</li> </ol>
Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, practice in a simulated setting, supervised clinical practice
Unit 3: Binocular Vision	
Sub-unit 3.3 : Ocular misalignment of eyes	Theory: 10 hrs
Objectives:	Content:
<ol> <li>Understand different ocular misalignments of the eye</li> <li>Perform various test to reveal ocular misalignment of the eye and record them</li> </ol>	<ol> <li>Content: Heterophoria: Esophoria, exophoria, vertical phoria and their measurement</li> <li>Heterotropia: Exotropia, Esotropia, vertical tropia and their measurement</li> <li>Concomitant vs Incomitant strabismus</li> <li>Paralytic and restrictive strabismus</li> </ol>
<b>Evaluation methods:</b> written exam, viva, performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated setting, supervised clinical practice
Unit 3 : Binocular Vision	setting, supervised enmod processes
Sub-unit 3.4 : Motor and sensory adaptation to strabismus	Theory: 5 hrs
Objectives:	Content:
<ol> <li>Understand various adaptation of strabismus</li> <li>Perform various tests of adaptation</li> </ol>	<ol> <li>Introduction to Diplopia, Abnormal Retinal correspondence and Suppression</li> <li>Abnormal head position in ocular misalignment</li> <li>Introduction to diplopia and Hess charting</li> <li>Nystagmus, Cause and its types</li> </ol>
Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, practice in a simulated setting, supervised clinical practice

Unit 3 : Binocular Vision			
<b>Sub-unit 3.5 : Basic tests in Orthoptics setting</b>	Theory: 9 hrs		
Objectives:	Content:		
<ol> <li>Under orthoptic evaluation of the eyes</li> <li>Perform orthoptic tests</li> </ol>	<ol> <li>Hirschberg and krimsky test</li> <li>Cover test, Prism cover test and its types</li> <li>Test for convergence and accommodative problems</li> <li>Test for suppression</li> <li>Tests for stereopsis</li> <li>Test for Prism fusion range, methods and interpretation</li> </ol>		
<b>Evaluation methods:</b> written exam, viva, performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated setting, supervised clinical practice		
Unit 3 : Binocular Vision			
Sub-unit 3.6 : Amblyopia and its management	Theory: 8 hrs		
Objectives:	Content:		
<ol> <li>Understand about Amblyopia and its management.</li> <li>Evaluation of amblyopic cases and manage them</li> </ol>	<ol> <li>Introduction</li> <li>Types</li> <li>Cause,</li> <li>Investigation-interpretation and</li> <li>Management</li> </ol>		
<b>Evaluation methods:</b> written exam, viva, performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated setting, supervised clinical practice		

# **Investigative Ophthalmology**

Total: 117 hrs Theory: 78 hrs Practical: 39 hrs

#### **Course Description**

This course provides the student with knowledge and skill required to carry out the important investigations in Ophthalmic Practice. Students will acquire knowledge on the need of different investigation procedures for specific eye problems and students will also be able to understand and interpret the findings of the investigations.

## **Course Objectives**

At the end of the course, the student will be able to:

- 1. Measure visual acuity (near and distance)
- 2. Perform colour vision test
- 3. Perform schirmer test and syringing test
- 4. Measure IOP
- 5. Perform Visual field and ultrasonography
- 6. Perform FFA, fundus and anterior segment photography
- 7. Perform exophthalmometry, pachymetry, keratometry and gonioscopy
- 8. Perform Fundus examination with direct and indirect ophthalmoscopy

#### **Recommended texts**

- 1. Comprehensive Ophthalmology; A K Khurana . New age international Publisher, India
- 2. Primary Care Optometry, Theodore Grosvenor . Published by Butterworth-Heinemann.

#### Reference books

- 1. Ophthalmic Assistant; Harold A Stein.
- 2. Text book of ophthalmology for para medicals, P.C Karmacharya.
- 3. Fundus Fluorescen and Indocynine Green Angiogram, Amresh Chopdar.
- 4. Hand book For Clinical Ophthalmic assistants- Principles and techniques of clinical ophthalmic procedures, Arvind eye care system.

Course: Investigative Ophthalmology			
Unit 1: Visual Acuity	Hrs. Theory: 6 Hrs. Practical: 5		
Objective:	Content:		
1. Define visual acuity. 2. Describe different methods of taking visual acuity in adult and children. 3. Describe different methods of taking near visual acuity.	<ol> <li>Definition of visual acuity, Principle of Visual acuity.</li> <li>Understand the required Illumination, Alignment, Conversion test distance.</li> <li>Different types of vision charts with its proper distance for adult         <ul> <li>Snellen's chart</li> <li>Landolt 'C' chart</li> <li>Tumbeling 'E' chart</li> <li>ETDRS</li> <li>LogMAR chart</li> </ul> </li> <li>Different types of vision acuity methods for kids &lt; 3 Yrs age         <ul> <li>OKN Test</li> <li>Catford drum Test</li> <li>Prefential looking Test</li> <li>Sheridan Gardiner Test</li> <li>Picture Chart</li> <li>Lea Symbols</li> </ul> </li> </ol>		
	5. Who definition of Blindness and Low Vision.		
<b>Evaluation Methods:</b> Written Exam, Viva, Performance Observation in clinical	Teaching/ Learning Activities / Resources: Classroom Instruction, Practice in a clinical setting		
setting			
Course: Investigative Ophthalmology			
Unit 2: Contrast and Colour Vision	Hrs. Theory: 5 Hrs. Practical: 2		
Objective:	Content:		
<ol> <li>Describe normal and abnormal colour vision and colour blindness.</li> <li>Describe different methods of evaluating colour vision.</li> <li>Identify different technique for contract sensitivity testing.</li> </ol>	<ol> <li>Different colour vision anomalies.         <ul> <li>a. Trichromacy</li> <li>b. Dichromacy</li> <li>c. Monochromacy</li> </ul> </li> <li>Associated diseases for colour vision defects</li> <li>Different materials for colour vision assessment and their interpretation.         <ul> <li>a. Ishihara chart</li> <li>b. D-15 Test</li> <li>c. Fransworth-Munsell 100 hue test.</li> </ul> </li> <li>Counselling for colour blindness</li> <li>Definition of contrast sensitivity and its measurement</li> <li>Different indication for colour vision and contrast sensitivity testing.</li> </ol>		

Evaluation Methods: Written Exam,	Teaching/ Learning Activities / Resources:
Viva, Performance Observation in clinical	Classroom Instruction, Practice in a clinical setting
setting	8
Course: Investigative Ophthalmology	
Unit 6: DRY EYE	Hrs. Theory: 4 Hrs. Practical: 2
Objective:	Content:
1. Define dry eye	1.Different methods for the assessment of tear film
2. Evaluate dry eye by different	a. Schirmer's test type I, type II
methods.	b. TBUT
3. Interpret the results of different tests	c. Tear meniscus level
	d. Rose Bengal test
<b>Evaluation Methods:</b> Written Exam,	Teaching/ Learning Activities / Resources:
Viva, Performance Observation in clinical	Classroom Instruction, Practice in a clinical setting
setting	
Course: Investigative Ophthalmology	
Unit 7: SYRINGING	Hrs. Theory: 5 Hrs. Practical: 2
Objective:	Content:
1. Explain tear drainage system and	1. Anatomy of lacrimal passage
different parts involving in tear	2. Equipment necessary for syringing
drainage.	a. Normal saline
2. Perform the proper technique for	b. Cannula
syringing	c. Syringe
3. Interpret the significance and	3. Regurgitation through: Same punctum, upper
complication of syringing.	punctum with clear fluid or with pus
	4. Probable complication such a Corneal abrasion,
	punctum tear, conjunctival laceration, infection
EL-4' M-4L-1- XV-4 E	due to contamination.
Evaluation Methods: Written Exam,	Teaching/ Learning Activities / Resources:
Viva, Performance Observation in clinical	Classroom Instruction, Practice in a clinical setting
setting Course: Investigative Ophthalmology	<u> </u>
Unit 8: Blood pressure, Blood sugar	Hrs. Theory: 4 Hrs. Practical: 3
level	
Objective:	Content:
1. Define blood pressure, Systiloc and	1. Definition of hypertension and hypotension and
Diastolic blood pressure.	abnormal heart rate.
2. Explain procedure of measuring blood	2. Normal and abnormal blood pressure at different
pressure.	age group.
3. Measure blood pressure.	3. Different types of Instrument for measuring blood
4. Define Hyper/ Hypo Glycaemia.	pressure.
5. Describe normal and abnormal blood	4. Knowledge of interpreting blood sugar level in
sugar level	fasting, PP and RBS.
6. Identify proper technique to withdraw	
blood from vein.	

Evaluation Methods: Written Exam, Viva, Performance Observation in clinical setting Course: Investigative Ophthalmology	Teaching/ Learning Activities / Resources: Classroom Instruction, Practice in a clinical setting	
Unit 9: Exopthalmometer	Hrs. Theory: 3 Hrs. Practical: 2	
Objective:	Content:	
<ol> <li>Define Exophthalmometer.</li> <li>List different types of exophthalmometer.</li> <li>Identify proper technique of performing different instrument for measuring proptosis.</li> </ol>	<ol> <li>Definition and causes of proptosis.         <ul> <li>a. Axial type</li> <li>b. Non axial type</li> </ul> </li> <li>Normal Axial range in different race of people.</li> <li>Types of equipment used for measuring exophthalmos.         <ul> <li>A. Hertel</li> <li>B. Luedde</li> <li>C. Naugle</li> </ul> </li> <li>Definition and Causes of Enophthalmos.</li> </ol>	
<b>Evaluation Methods:</b> Written Exam, Viva, Performance Observation in clinical setting	Teaching/ Learning Activities / Resources: Classroom Instruction, Practice in a clinical setting	
Course: Investigative Ophthalmology		
Unit 10: Anterior segment photography, fundus photography, OCT	Hrs. Theory: 7 Hrs. Practical: 2	
Objective:	Content:	
<ol> <li>List different equipment's for anterior and posterior segment evaluation.</li> <li>Perform Pentacam, slitlamp fundus camera, panfundoscope,</li> <li>Evaluate OCT macula, OCT glaucoma, OCT anterior segment with interpretation of its result.</li> </ol>	<ol> <li>Different types of OCT and its principle.</li> <li>Orientation about anterior and posterior segment OCT.</li> <li>Disease diagnosis, evaluation and its findings.</li> </ol>	
<b>Evaluation Methods:</b> Written Exam, Viva, Performance Observation in clinical setting	Teaching/ Learning Activities / Resources: Classroom Instruction, Practice in a clinical setting	
Course: Investigative Ophthalmology  Unit 11: Pachymetry Hrs. Theory: 4 Hrs. Practical: 2		
Unit 11: Pachymetry Objective:	Content:	
<ol> <li>Explain different corneal parameters and dimensions.</li> <li>Identify corneal thickness value in different age groups</li> <li>Perform pachymetry with different</li> </ol>	<ol> <li>Pachymetry and its importance in the diagnosis of different corneal diseases?</li> <li>Indication of abnormal pachymetry value in different diseases.</li> <li>Types of pachymetry (contact, Non-contact)</li> </ol>	

techniques	4. Uses of pachymetry.	
4. List the complications of pachymetry	5. Role of pachymetry in clinical practice.	
Evaluation Methods: Written Exam,	Teaching/ Learning Activities / Resources:	
Viva, Performance Observation in clinical	Classroom Instruction, Practice in a clinical setting	
setting  Course: Investigative Ophthalmology		
Unit 12: Gonioscopy	Hrs. Theory: 4 Hrs. Practical: 2	
Objective:	Content:	
1. Define anterior chamber angle	1. Different structures of anterior chamber angle	
structures.	2. Different types of Gonioscopy used in clinical	
2. Explain the principal of Gonioscopy	basis.	
with clinical uses and interpretation of	3. Different system of grading of angle of anterior	
findings.	chamber structure by gonioscopy.	
Evaluation Methods: Written Exam,	Teaching/ Learning Activities / Resources:	
Viva, Performance Observation in clinical	Classroom Instruction, Practice in a clinical setting	
setting		
Course: Investigative Ophthalmology		
Unit 13: Ophthalmoscope, 90D lens, Slitlamp	Hrs. Theory: 7 Hrs. Practical: 3	
Objective:	Content:	
<ol> <li>Perform ophthalmoscopy.</li> <li>Perform distance direct ophthalmoscope and interpret the</li> </ol>	<ol> <li>Definition of direct and indirect Ophthalmoscopy and its principle</li> <li>Characteristic of image formation and</li> </ol>	
result.	prerequisites for performing ophthalmoscopy	
3. Identify different features available in	3. Advantage of the binocular indirect	
ophthalmoscope.	ophthalmoscope.	
4. Perform indirect ophthalmoscope.	4. Different types of lenses available for fundus	
5. Perform 90d lens for fundus	evaluation.	
evaluation	5. Methods of Lens Care.	
6. Identify different parts of slitlamp and	6. Importance of fundus evaluation	
its uses in clinical practice.	<ul><li>7. Principle of slit lamp evaluation</li><li>8. Technique of using slitlamp for disease diagnosis.</li></ul>	
Evaluation Methods: Written Exam,	Teaching/ Learning Activities / Resources:	
Viva, Performance Observation in clinical	Classroom Instruction, Practice in a clinical setting	
setting	Clussioon instruction, Fractice in a clinical seaming	
Course: Investigative Ophthalmology		
Unit 14: FFA	Hrs. Theory: 7 Hrs. Practical: 2	
Objective:	Content:	
<ol> <li>Identify conditions required for performing FFA</li> <li>Identify different test required before</li> </ol>	Introduction and principle of Fundus Fluorescein     Angiography with needful drugs and its     complications.	
performing FFA.	2. Describe different stage of FFA with their findings	

3. Interpret result of FFA.	3. Necessary blood test for the prevention of complication of dye used.
<b>Evaluation Methods:</b> Written Exam,	Teaching/ Learning Activities / Resources:
Viva, Performance Observation in clinical	Classroom Instruction, Practice in a clinical setting
setting	
Course: Investigative Ophthalmology	
Unit 15: Keratometry, Biometry	Hrs. Theory: 7 Hrs. Practical: 2
Objective:	Content:
<ol> <li>Perform keratometry.</li> <li>Identify the normal axial length.</li> <li>Identify 'A' constant relation with different types of IOL.</li> <li>Explain different technique of probe position during Biometry.</li> </ol>	<ol> <li>Definition of keratometry, its types and its principle.</li> <li>Uses of keratometry for the evaluation of different diseases.</li> <li>Definition of biometry and its principle.</li> <li>Measurement and power calculation using different formula and their importance.</li> <li>Proper probe position and its orientation</li> <li>Contact and emersion technique.</li> <li>Complication and errors while performing biometry.</li> </ol>
Evaluation Methods: Written Exam,	Teaching/ Learning Activities / Resources:
Viva, Performance Observation in clinical	Classroom Instruction, Practice in a clinical setting
setting	

# **Ocular Surgery**

Total: 195 hrs Theory: 156 hrs Practical: 39 hrs

## **Course Description**

This course provides knowledge and skills to the students about different types of ocular surgical technique, investigative, procedure and basic ophthalmic nursing procedure required to perform during, after and or before surgery. Student will also develop knowledge and skills on the ocular surgical procedure to assist the ophthalmologist and on the eligible cases to perform specified surgeries on their own.

## **Course Objectives**

At the end of the course, the students will be able to:

- 1. Describe the different role of ophthalmic assistant in the hospital and community.
- 2. State the specific ophthalmic nursing care of the individual receiving ocular surgery.
- 3. Explain the concept of operation theatre and Preparer patient for ocular surgery.
- 4. Prepare surgical instrument set for different ophthalmic surgery and Sterilize ophthalmic OT, basic instruments and equipment and consumables required for surgeries.
- 5. Carryout aseptic procedure and infection control during ocular surgery and assist the ophthalmologist in different types of ocular surgeries
- 6. Perform different types of ocular minor surgical procedures and investigations independently.
- 7. State the pre -operative and post -operative care of different types of ophthalmic surgery.
- 8. Identify the different type of anesthesia for ocular surgery.
- 9. Explain the role of ophthalmic assistant in administration of drug.

#### **Recommended Texts:**

- 1. A.K. Khurana, Comprehensive Ophthalmology, Sixth Edition
- 2. Jakable and Sigelman, Advanced Techniques in Ocular surgery, First Edition
- 3. AK Khurana, Ophthalmic Nursing, First Edition
- 4. Giri M and Sharma P, Fundamental of Nursing, Medhavi publication,

#### **Reference Book:**

- 2. Waltman and Krupin, Complications in ophthalmic surgery, First edition
- 3. JAPEE and Sandeep Saxena, Ophthalmic Surgery the Cutting, First Edition
- 4. Pandey A, Essential of operation theatre Nursing, First Edition

Unit 1:Introdction to ophthalmic assistant	Theory: 3 hrs
Objectives:	Content:
1. Explain about OA and their traits, roles and responsibilities.	Ophthalmic assistant:
Evaluation methods: written exam, viva	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated setting
<b>Unit 2: Ophthalmic Nursing Care</b>	Theory: 10 hrs Lab/practical: 4 hrs
Objectives:	Content:
1. Explain about ophthalmic nursing care. 2. Measure Temperature, Pulse, Respiration and Blood pressure.  Output  Description:  Description:	2.1 Ophthalmic Nursing measures to Assess the patient.  a. Vital signs

	<ul> <li>2.5 Blood Pressure.</li> <li>Definition.</li> <li>types</li> <li>Systolic and diastolic.</li> <li>Purpose</li> </ul>
	<ul><li>Factors affecting</li><li>Sites of measuring</li></ul>
Evaluation methods: written exam, viva, performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated setting, supervised clinical practice
<b>Unit 3: Operation Theatre</b>	Theory: 40 hrs Lab/practical: 10hrs
Objectives:	Content:
<ol> <li>Understand the objective of OT and OT management and aseptic technique.</li> <li>Explain role and responsibilities of the scrub and circulating personnel.</li> <li>Perform trolley preparation in different eye surgery.</li> <li>Know the equipment, Instruments, Consumable and non- consumable.</li> <li>Understand OT hazards and risk management.</li> <li>Describe definition, type of ocular anesthesia, equipments, role and responsibilities of anesthetics ophthalmic assistant and management of recovery patient.</li> <li>Perform the pre-operative and post-operative management.</li> <li>Know general route of drug administration and ocular route of drug administration.</li> <li>Perform eye/nose medication and rules for drug administration.</li> </ol>	<ul> <li>Objective</li> <li>Principal</li> <li>Operation theatre personnel.</li> <li>Characteristics of ophthalmic assistant.</li> <li>Operation theatre attire.</li> <li>Cleaning of operation theatre.</li> <li>Instruments processing in operation theatre.</li> <li>Hand washing, surgical scrubbing, gowning, gloving</li> <li>Role and responsibilities of scrub personnel.</li> <li>Role and responsibilities of circulating personnel.</li> <li>Trolley preparation for different surgery.</li> <li>List out the basic ophthalmic instruments used in ocular surgery.</li> <li>Introduction to Operation theatre equipment.</li> <li>Knowledge about the consumables and non-consumables.</li> <li>OT hazards and risk management.</li> <li>3.2 Anesthesia</li> <li>Definition</li> <li>Types</li> <li>Anesthesia in ocular surgery</li> <li>Complication</li> <li>Equipment used in anesthesia</li> </ul>

	<ul> <li>Role and responsibilities of anesthetics ophthalmic assistant</li> <li>Management of recovery patient</li> <li>3.3 Pre-operative care</li> <li>Definition</li> <li>Purposes</li> <li>Articles require for pre-operative care</li> <li>component</li> <li>Counseling</li> <li>Pre -operative care for different surgery</li> <li>3.4 Post- operative care</li> <li>Definition</li> <li>Purpose</li> <li>Articles require</li> <li>Care of patient in recovery room</li> <li>Post- operative care for different surgery</li> <li>Post- operative dressing ,instruction, discharge- and follow up</li> <li>3.5 Drug Administration</li> <li>Review from pharmacology</li> <li>Route of administration of drugs</li> <li>Oral medication</li> <li>Route of ocular medicines.</li> <li>Preparing medication from ampoule</li> <li>Preparing medication from vials.</li> <li>Intramuscular injection</li> <li>Intravenous medication</li> <li>Venepuncture</li> <li>Starting new I/V line</li> <li>Intravenous care</li> <li>Complication of I/V infusion</li> <li>Instilling medication into eye/nose</li> <li>Topical medication.</li> <li>Rules for administration of medicine.</li> </ul>
<b>Evaluation methods:</b> written exam, viva, performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated setting, supervised clinical practice

Uni	t 4: Ocular surgery (Assisting)	Theory: 78 hrs Lab/practical: 15 hrs
	ectives:	Content:
		4.1 Cataract.
1.	Explain instruments, step, consumable and	Review different types of cataract surgery.
	medicines in cataract surgery.	• List the instrument of SICS+IOL
		• List the instrument of phaco emulsification +
		IOL
		• Step of surgery (phaco, SICS ,ECCE )
		• Consumable and medicines used in cataract
		surgery.
		4.2 Glaucoma
2.	Explain instruments, step, consumable and	Review different types of glaucoma surgery.
	medicines in Glaucoma surgery	• List the instruments of different types of
		glaucoma surgery.
		• Steps of surgery. (Trabeculectomy, valve
		implant, Mitomycin/ 5fu)
		Consumable and medicines used in glaucoma
		surgery.
3.	Describe instruments, step, consumable	4.3 Surgery of the Nasolacrimal passage.
	and medicines in nasolacrimal passage	• Review the types of DCR surgery.
	surgery.	• List the instruments of different type of
		surgery.
		• Step of the surgery.( DCR, Endo DCR, 3snip
		surgery, Syringing and probing.)
		Consumable and medicines used in lacrimal
,		sac surgery.  4.4 Strabismus
4.	Describe instruments, step, consumable	<ul> <li>Review the types of strabismus surgery.</li> </ul>
	and medicines in strabismus surgery.	<ul><li>List the instruments used in surgery.</li></ul>
		<ul> <li>Step of the surgery.(one muscles/two/three</li> </ul>
		muscles)
		<ul> <li>Consumable and medicines used in surgery.</li> </ul>
		4.5 Keratoplasty
5.	Explain instruments, step, consumable and	Review of keratoplasty surgery
	medicines in keratoplasty surgery.	• List the instruments of different type of
		keratoplasty(PK/TPK/PK IOL/DSEK/DEMEK
		• Step of the surgery.
		Consumable and medicines used in surgery.
		4.5 Vitrectomy
6.	Describe instruments, step, consumable	Review of different type of vitrectomy surgery
	and medicines in vitro-retinal surgery.	• List the instruments used in vitrectomy
		surgery.(Open sky vitrectomy/Vitrectomy with
		gas/Vitrectomy with silicon oil, vitrectomy with
		membrane peeling/Endo laser/Fluid air
		exchange

		<ul><li> Steps of surgery.</li><li> Consumable and medicines used in surgery.</li></ul>
7.	Explain instruments, step, consumable and medicines in different type of lid surgery.	<ul> <li>Retinal detachment</li> <li>Review of different types RD surgery.</li> <li>List the instruments used in RD surgery( Pneumatic retinopexy, Cryobuckle, Bandbuckle</li> <li>Step of surgery</li> <li>Consumable and medicines used in surgery.</li> <li>Lid surgery.</li> <li>Review of different type of lid surgery.</li> </ul>
		<ul> <li>List the instruments used in different types of lid surgery. (Entropion, Ectropion, Ptosis and reconstruction)</li> <li>Step of surgery.</li> <li>Consumable and medicines used in surgery.</li> </ul>
8.	Describe instruments, steps, consumable and medicines in orbitotomy surgery.	<ul> <li>Orbitotomy</li> <li>Review of different type of orbitotomy surgery.</li> <li>List the instruments used in surgery.(Anterior orbitotomy,</li> <li>Middle</li> </ul>
9.	Describe instruments, steps, consumable and medicines in enucleation surgery.	<ul> <li>orbitotomy, Posteriororbitotomy with bone work.</li> <li>Step of surgery</li> <li>Consumable and medicines used in surgery.</li> <li>4.9 Enucleation</li> </ul>
10.	Explain instruments, step, consumable and medicines in evisceration surgery.	<ul> <li>Review of Enucleation surgery.</li> <li>List the instruments used in surgery.</li> <li>Step of surgery.</li> <li>Consumable and medicines used in surgery.</li> <li>4.10 Evisceration</li> </ul>
11.	Explain instruments, step, consumable and medicines in exenteration surgery.	<ul> <li>Review of evisceration surgery.</li> <li>List the instruments used in surgery.</li> <li>Step of surgery.</li> <li>Consumable and medicines used in surgery.</li> <li>4.11 Exenteration</li> </ul>
12.	Explain instruments, step, consumable and medicines in excisional biopsy.	<ul> <li>Review of exenteration.</li> <li>List the instruments used in surgery.</li> <li>Step of surgery.</li> <li>Consumable and medicines used in surgery.</li> <li>4.12 Excision biopsy</li> </ul>
13.	Explain instruments, step, consumable and	<ul> <li>List the instruments used in surgery.</li> <li>Step of surgery(Small, Medium, Big)</li> <li>Consumable and medicines used in surgery.</li> </ul>

11.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	440 FIL 4
medicines in electroepilation.	4.13 Electro-epilation
	Review the anatomy of lid and disorder.
	• List the instruments use in electro- epilation.
	• Step of epilation.
	Consumable and medicines used in electro
14. Explain instruments, step, consumable and	epilation.
medicines in pterygium excision and	4.14 Pterygium excision and conjunctival graft.
conjunctival graft.	
	• Review of anatomy and disorder of
	conjunctiva.
	• List the instruments use in pterygium excision
	and conjunctival graft.
	Step of surgery.
	<ul> <li>Consumable and medicines used in surgery.</li> </ul>
<b>Evaluation methods:</b> written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, practice in a simulated
	setting, supervised clinical practice
This 5. Min on outro coulon garagery	Theorem 25 has I show actical 10 has
Unit 5: Minor extra ocular surgery.	Theory: 25 hrs   Lab/practical: 10 hrs   Content:
Objectives:  1. Perform preparation of patient, surgical area,	Chalazion I and C
step of surgery, possible complication and	5.1 Review anatomy and physiology of the eye lid.
their management of extra ocular surgeries.	Disorder of the lid.
their management of extra octilar surgeries.	<ul><li>Disorder of the fid.</li><li>Chalazion.</li></ul>
	o Entropion.
2. Understand instruments, trolley preparation,	<ul><li>Lid Abscess.</li></ul>
consumable and post –operative management	<ul><li>Lid Prosecss.</li><li>Lid laceration (Trauma).</li></ul>
of entropion, chalazion, lid laceration repair,	S Ela lacoration (Tradina).
incision and drainage of lid abscess and	5.2 Chalazion incision and curettage
externum.	Introduction
	• Instruments.
	Consumable.
	<ul> <li>Patient Preparation/ Trolly preparation</li> </ul>
	<ul> <li>Step and procedures of surgery.</li> </ul>
	<ul><li>Step and procedures of surgery.</li><li>Complication of surgery.</li></ul>
	Post- operative care.
	5.3 Entropion Correction
	Introduction.
	Instruments.
	<ul><li>Consumables.</li></ul>
	<ul><li>Patient Preparation/Trolly preparation.</li></ul>
	<ul> <li>Step and procedures of surgery.</li> </ul>
	Complication of surgery.  Post approximation again.
	Post- operative care.

5.4 Lid abscess Incision and Drainage. Introduction. Instruments. Consumable. • Patient preparation/Trolley preparation. Step and procedure of surgery. Complication of surgery. Post- operative care. 5.5 Lid laceration repair. Introduction Instruments. Consumables. Patient preparation/Trolley preparation. Step and procedure of the surgery. Complication of the surgery. Post- operative care. Evaluation methods: written exam, viva, **Teaching / Learning Activities / Resources:** classroom instruction, practice in a simulated performance observation in clinical setting setting, supervised clinical practice

# **Community Ophthalmology-I**

Total: 156 hrs Theory: 117 hrs Practical: 39 hrs

#### **Course Description**

This course provides the knowledge and skill to the students to plan, implement, monitor and evaluate the eye health need and interventions in defined population. Developing tools to assess the magnitude of eye problem calculate disease burden and make conversant with current national and global eye health strategies and plan on eye health. Make conversant with importance of community participation in eye health including concept of primary health/eye health care.

## **Course Objectives**

At the end of the course, the students will be able to:

- a) Assess quality of eye health at community, state and national level
- b) Manage community participation for planning and implementing eye care programs.
- c) Conduct and evaluate eye health intervention programs
- d) Organize primary eye care training to different stakeholders

#### **Recommended Textbooks**

1. <u>Park's Textbook of Preventive and Social Medicine</u>, by K. Park. Published by M/S BanarasidasBhanot, Jabalpur, India. Current edition.

## Reference Books and published materials

- 2. Global Action Plan, WHO Publications
- 3. National Eye Health Policy, MoHP
- 4. WHO world Report on Vision, WHO
- 5. IAPB Vision Atlas IAPB
- 6. Epidemiology of Blindness in Nepal, NNJS publications
- 7. Cataract surgical outcome and predictors of outcome in Lumbini Zone and Chitwan district of Nepal, YD Sapkota
- 8. Midterm evaluation of eye care services in Nepal-2011, MoHP publication

Course: Community Ophthalmology - I
Sub-unit 1.1: Health care of people: Concept of health
Content:   Concept of health as given by Alma-Ata declaration/WHO – Primary health care, its definition and elements,   2. Able to measuring disease burden   3. Characteristic features of physically, mental and socially healthy person with examples.   4. Elements of PHC   5. Essential health care services   6. PHC related national health programs/eye care programs   7. Method of measuring disease burden in community (Magnitude, prevalence, incidence, endemicity, epidemic and social burden and financial burden)   Evaluation methods: written examinations, viva   Teaching / Learning Activities / Resources: classroom instruction, instructor led discussion, textbook self-study, related charts and handouts   Unit 2: Primary Health Care   Theory: 20 hrs   Sub-unit 2.1: Define Health and determinants of health   Content:   1. List determinants of health by category.   2. Explain how a particular determinant is   Content:   1. Determinants of health.   2. Relationships between disease and the   Content:   1. Determinants of health.   2. Relationships between disease and the   Content:   2. Relationships between diseas
1. Concept of health as given by Alma-Ata declaration/WHO – Primary health care, its definition and elements,  2. Able to measuring disease burden  2. Able to measuring disease burden  2. Able to measuring disease burden  3. Characteristic features of physically, mental and socially healthy person with examples.  4. Elements of PHC  5. Essential health care services  6. PHC related national health programs/eye care programs  7. Method of measuring disease burden in community (Magnitude, prevalence, incidence, endemicity, epidemic and social burden and financial burden)  Evaluation methods: written examinations, viva  Evaluation methods: written examinations, viva  Teaching / Learning Activities / Resources: classroom instruction, instructor led discussion, textbook self-study, related charts and handouts  Unit 2: Primary Health Care  Sub-unit 2.1: Define Health and determinants of health  Objectives:  Content:  1. List determinants of health by category.  2. Explain how a particular determinant is
declaration/WHO – Primary health care, its definition and elements,  2. Able to measuring disease burden  2. Able to measuring disease burden  3. Characteristic features of physically, mental and socially healthy person with examples.  4. Elements of PHC  5. Essential health care services  6. PHC related national health programs/eye care programs  7. Method of measuring disease burden in community (Magnitude, prevalence, incidence, endemicity, epidemic and social burden and financial burden)  Evaluation methods: written examinations, viva  Evaluation methods: written examinations, viva  Teaching / Learning Activities / Resources: classroom instruction, instructor led discussion, textbook self-study, related charts and handouts  Unit 2: Primary Health Care  Theory: 20 hrs  Sub-unit 2.1: Define Health and determinants of health  Objectives:  1. List determinants of health by category.  2. Explain how a particular determinant is
Evaluation methods: written examinations, viva  Teaching / Learning Activities / Resources: classroom instruction, instructor led discussion, textbook self-study, related charts and handouts  Unit 2: Primary Health Care  Theory: 20 hrs  Sub-unit 2.1: Define Health and determinants of health  Objectives:  Content:  1. List determinants of health by category. 2. Explain how a particular determinant is 2. Relationships between disease and the
viva classroom instruction, instructor led discussion, textbook self-study, related charts and handouts  Unit 2: Primary Health Care Theory: 20 hrs  Sub-unit 2.1: Define Health and determinants of health  Objectives: Content:  1. List determinants of health by category. 2. Explain how a particular determinant is  Classroom instruction, instructor led discussion, textbook self-study, related charts and handouts  Theory: 20 hrs  Content:  1. Determinants of health. 2. Relationships between disease and the
Unit 2: Primary Health Care Theory: 20 hrs  Sub-unit 2.1: Define Health and determinants of health  Objectives: Content:  1. List determinants of health by category. 2. Explain how a particular determinant is  textbook self-study, related charts and handouts Theory: 20 hrs  Content:  1. Determinants of health. 2. Relationships between disease and the
Unit 2: Primary Health Care Sub-unit 2.1: Define Health and determinants of health Objectives: Content:  1. List determinants of health by category. 2. Explain how a particular determinant is Content: 2. Relationships between disease and the
Sub-unit 2.1: Define Health and determinants of health  Objectives:  Content:  List determinants of health by category.  Explain how a particular determinant is  Relationships between disease and the
Objectives:Content:1. List determinants of health by category.1. Determinants of health.2. Explain how a particular determinant is2. Relationships between disease and the
<ol> <li>List determinants of health by category.</li> <li>Explain how a particular determinant is</li> <li>Determinants of health.</li> <li>Relationships between disease and the</li> </ol>
2. Explain how a particular determinant is 2. Relationships between disease and the
related to a disease /health problem. determinants of health with examples
3. Describe the scope of health care. 3. Scope of health care: promotive, preventative
4. State definitions of the levels of health curative, rehabilitative.
care: 4. Level of health care: primary, secondary and
5. Mention the purposes of public health. tertiary
6. Discuss the concept of prevention. 5. Functions and goals of public health.
7. Categorize levels of prevention 6. Concept of prevention
7. Levels of prevention with examples
Evaluation methods: written examinations, Teaching / Learning Activities / Resources:
viva classroom instruction, instructor led discussion,
textbook self-study, related charts and handouts
Unit 3: Primary Health Care Theory: 25 hrs Practical: 12 Hr
Sub-unit 3.1: Community participation in health care
Objectives: Content:
1. Describe community participation.  1. Concept of community participation and
2. Explain why community participation in measuring it.
health care is important.  2. Importance of community participation.
3. Mention the examples of community participation.  3. Components of community participation.  3. Components of community participation.

Evaluation methods: written examinations,	Teaching / Learning Activities / Resources:
viva	classroom instruction, instructor led discussion,
	textbook self-study, related charts and handouts
Unit 4: Primary Health Care	Theory: 32 hrs Practical: 17 Hrs.
Sub-unit 4.1: Planning and priority setting in	health
Objectives:	Content:
1. Define eye health status of the country	1. Health/Eye health status indicators.
2. Set priority in eye health with available	2. Uses of health indicators.
information and eye/health indicators.	3. Basic health profile of Nepal.
·	4. Health care priority setting: principles,
	method and challenges.
	5. Prevalence and incidence blindness and visual
	impairment in Nepal.
	6. Prevalence of blindness and visual
	impairment at global and neighboring
	country/SAARC
	7. Calculation of CSR, CSC and WHO standard
	of visual outcome.
Evaluation methods: written examinations,	Teaching / Learning Activities / Resources:
viva	classroom instruction, instructor led discussion,
	textbook self-study, related charts and handouts
<b>Unit 5: International Eye Health</b>	Theory: 10 hrs
<b>Sub-Unit 5.1: Sustainable Development Goals</b>	(SDG), WHO Action Plan, WHO and IAPB eye
heath strategies at global and regional level	
Objectives:	Content:
1. State in brief the history, background, goals	1. Principles and goals of the "SDG" program.
and target of Sustainable Development	2. Sustainable development goals
Goals (SDG).	3. Vision of SDG given by UNDP
9. Understand relation between SDG and eye	4. Relationship between SDG goal and eye
health.	health a
	5. Nepal's achievement on MDGs
Evaluation methods: written examinations,	Teaching / Learning Activities / Resources:
viva	classroom instruction, instructor led discussion,
	textbook self-study, related charts and handouts

## **Third Year**

- 1. Health Care Management
- 2. Ocular Disorder- II
- 3. Community Ophthalmology- II
- 4. Low Vision and Optical Dispensing
- 5. Clinical Practice- I (Hospital Based)
- 6. Clinical Practice- II (Hospital Based)
- 7. Clinical Practice- III (Community Based)

## **Health Care Management**

Total: 117 hrs Theory: 78 hrs Practical: 39 hrs

#### **Course Description**

This course introduces the student to concepts about management of health care services, as it applies to the operations of an eye centre and community eye hospital. This course teaches about the fundamental principles of management, eye centre management, health care system in Nepal, National eye health policy and programmes, eye health human recourse in Nepal, eye health related organizations and agencies, safety and disaster management, entrepreneurship, professional ethics and health related laws. The student will acquire the necessary knowledge and skill to deal effectively with the diverse challenges of health service management.

## **Course Objectives**

On completion of the course the student will be able to:

- 1. Explain the theories, principles and components of health care management.
- 2. Manage a Eye Centre in the real setting
- 3. Describe the eye health policy, tell its philosophy, and identify its strengths and weaknesses.
- 4. Apply the principles of Inventory management
- 5. Identify the different levels of eye health human recourse in Nepal and describe the functions of the eye health human recourse in developing world
- 6. Prepare a business plan of Eye Centre
- 7. Prepare the disaster preparedness plan for Eye Centre
- 8. Explain the code of ethics of the Ophthalmic Assistant.

#### **Recommended Texts**

- 1. Macmohan, R. et al. <u>On Being In Charge, A guide to Management in Primary Health Care</u>. WHO. Current edition.
- 2. Dixit, H.The Quest for Health. Educational Enterprise, (P) Ltd., Kathmandu. 1999.
- 3. Pradhananga, Y. <u>Health Management</u>. Council for Technical Education and Vocational Training, Bhaktapur, Nepal.2055B.S.-
- 4. Kamala, T. &Bishnu, R. <u>Leadership and Management for Nurses</u>. Health Learning Materials Centre, TribuvanUniversity, Kathmandu. 1990
- 5. Sapkota, Shiba Prasad, Health Management and Community Health, Vidhyarthee PustakPrakasan, Bhotahity

#### **Reference Texts**

- 1. Human resource Management in Hospital, Khan Faisal MD, Paras Medical Publication, hyderabad, India, current edition
- 2. Park, K. <u>Textbook of Preventive and Social Medicine</u>, Bhandrasidas Bhanot, Jabalpur, India. 2000.

	T
Course: Health Care Management	
Unit 1: Introduction of Health Care	Hrs. theory: 26
Management	
Sub-unit 1.1: Introduction to Health Care	Hrs. theory: 2
Management	
Objectives:	Content:
1. Define Health.	1. Definition of health and its determination
2. Define management, health management and	2. The definitions of management, health
health care management.	management & health care management
3. Differentiate between management &	3. Principles of management.
administration.	4. Concepts of management versus
4. Describe the function of management.	administration.
	5. Function of management in the Eye
	Centre and Eye Hospital context.
Examination methods: written exams (short	Teaching / Learning Activities: textbook
answer questions)	self-study - Instructor led discussion,
-	reference study assignment
Unit 1: Introduction of Health Care Manageme	ent
Sub-unit 1.2: Planning of Health service	Hrs. theory: 2
Objectives:	Content:
1. Describe the process and purpose of	1. Definition of planning.
planning.	2. Types of planning.
2. Describe different types of planning.	3. Planning cycle (PIE cycle)
3. Explain the planning cycle.	4. Planning steps.
4. Describe the steps of planning.	5. Current health planning system of Nepal.
5. Explain the health planning system in Nepal.	
<b>Examination methods:</b> written exams (short	Teaching / Learning Activities: textbook
answer questions)	self-study - classroom instruction
Unit 1: : Introduction of Health Care Management	
Sub-unit 1.3: Organizing of Health Service	Hrs. theory: 3
Objectives:	Content:
1. Describe the process and purpose of	1. Definition of organization.
organization.	2. Types of Health Service organizations and
2. Identify different types of health service	their organograms.
organizations.	3. Organograms of Health structure of Nepal
3. Describe the level of eye care system	as based on federal system.
<b>Examination methods:</b> written exams (short	Teaching / Learning Activities: textbook
answer questions)	self-study - Classroom instruction, field visit
Unit 1: : Introduction of Health Care Manager	nent
Sub-unit 1.4: Staffing	Hrs. theory: 2
Objectives:	Content:
1. Define staffing and state the purpose of	1. Definition and purpose of staffing.
using a job description.	2. Essential elements of a job description.
2. Identify the elements of a job description.	3. Staffing patterns of a Community <b>Eye</b>
3. Identify the staffing patterns of different	Centers and Secondary Eye Hospital.

health institutions Nepal		
Examination methods: written exams (short	Teaching / Learning Activities: textbook	
answer questions)	self-study - Classroom instruction, field visit	
Unit 1: : Introduction of Health Care Management		
Sub-unit 1.5: Directing	Hrs. theory: 2	
Objectives:	Content:	
1. Describe the meaning and purpose of	1. Definition of directing.	
directing.	2. Purpose of directing.	
2. Describe the purpose, method and	3. Supervision: definition, purpose,	
techniques of supervision	importance, techniques and tools	
3. Explain the purpose and tools of monitoring.	4. Monitoring: definition, purpose,	
4. Describe the process of monitoring.	importance, process and tools	
5. Describe the importance of motivation in	5. Theory of motivation, Maslow's need	
health care organization.	hierarchy, Importance of motivation in	
6. Describe the communication, its type and the	health service organizations.	
importance of communication in health.	6. Communication, its type and the role of	
7. Discuss the characteristics of leaders and the	communication in health.	
leadership styles and its advantage and	7. Definition of Communication, its type and	
disadvantage of each leadership styles	the role of communication in health.	
Explain why an autocratic leadership style	8. Definition of leadership, Style of	
has historically been most commonly used in	leadership, advantage and disadvantage of	
Nepal.	(autocratic, democratic, laissez faire	
	leadership styles	
<b>Examination methods:</b> written exams (short	Teaching / Learning Activities: textbook	
answer questions)	self-study - Classroom instruction, field visit	
Unit 1: : Introduction of Health Care Managen		
Sub-unit 1.6: Controlling	Hrs. theory: 2	
Objectives:	Contents:	
1. Define Controlling in health care	1. Definition of controlling	
2. Explain the Steps of controlling	2. Steps of controlling	
	3. Importance of controlling	
Unit 1: : Introduction of Health Care Managen		
Sub-unit 1.7: Coordination	Hrs. theory: 2	
Objectives:	Content:	
1. Define coordination in terms of health	1. Definition of coordination.	
management.	2. Types of coordination	
2. Identify different types of coordination.	- External and internal	
3. Identify the techniques and processes of	- Horizontal and vertical	
coordination.	3. Techniques and processes of coordination.	
4. Explain the types of coordination to be used	4. Selecting styles of coordination in EYE	
at the EYE CENTRE level.	CENTRE level.	
<b>Examination methods:</b> written exams (short	Teaching / Learning Activities: textbook	
answer questions)	self-study - Classroom instruction, field visit	

Unit 1: : Introduction of Health Care Management	
Sub-unit 1.8: Safety and Disaster in eye	Hrs. theory: 6
centre and hospital	·
Objectives:	Content:
<ol> <li>Discuss historical events and potential for future disasters from these causes: earthquake, flooding, nuclear explosion.</li> <li>Identify the health risks created by each of these disasters.</li> <li>Describe the policies and procedures developed by the earthquake preparedness committee in central level.</li> <li>Identify the major points of the national guidelines for disaster management.</li> <li>Identify the civil organizations of a community for preserving community welfare in a disaster situation.</li> <li>Describe the role of the In charge of eye centre in coordinating a disaster preparedness response.</li> </ol>	<ol> <li>Historical events and potential for future disasters from earthquakes, flooding and nuclear explosion.</li> <li>Definition, concepts and types of disasters.</li> <li>Risks to public health created by these disasters.</li> <li>National activities for earthquake, landslide, wildfire storms preparedness</li> <li>Disaster management cycle.</li> <li>National guidelines for the management of major disasters.</li> <li>Coordination of community resources and leadership responsibility for disaster management.</li> <li>Structure and responsibility of District Disaster Coordination Committee</li> <li>Composition, role and mobilization mechanism of Rapid response team in disaster preparedness</li> </ol>
Examination methods: written exams (short	and response activities.  Teaching / Learning Activities: textbook self-study
answer questions)	- Classroom instruction, field visit
<b>Unit 1:: Introduction of Health Care Managen</b>	nent
Sub-unit 1.9: Reporting	Hrs. Theory: 2
Objectives:	Content:
<ol> <li>Discuss the purpose of reporting.</li> <li>Describe the qualities of an effective report.</li> <li>Prepare a simulated eye centre report from a case example.</li> <li>Describe the importance of reporting in eye care centers.</li> </ol>	<ol> <li>Definition and purpose of reporting.</li> <li>Types of report</li> <li>Characteristics of reporting:         <ul> <li>Complete, accurate, sequential, timely and understandable.</li> <li>Type of reports used by eye centre</li> </ul> </li> </ol>
Examination methods: written exams (short	Teaching / Learning Activities: textbook self-study
answer questions)	- Classroom instruction, field visit
Unit 1: : Introduction of Health Care Managen	,
Sub-unit 1.10: Budgeting and Financial	Hrs. theory: 4
Management Management	
Objectives:	Content:
<ol> <li>Define budget and budgeting.</li> <li>Mention the functions of budget.</li> <li>Discuss the purpose for using a budget in health management.</li> <li>Identify and compare different types of budgets.</li> <li>Discuss the components of budget sheet.</li> </ol>	<ol> <li>Budgeting: Definition and functions</li> <li>Types of budgets (capital and recurrent) and characteristics of various budgets.</li> <li>Components of budget sheet</li> <li>Tools for financial management (Voucher, ledger, daybook, audit)</li> </ol>

Examination methods: written exams (short	Teaching / Learning Activities: classroom
answer questions)	instruction, textbook self-study -
Unit 2: Health Care System in Nepal	Hrs. theory: 4
Sub-unit: 2.1 Health Care system	Hrs. theory: 4
Objectives:	Content:
<ol> <li>Define "health care system" and explain the purpose and characteristics of a health care system.</li> <li>Describe the history of the development of health services and eye health services in Nepal.</li> <li>Describe type of health care approaches.</li> <li>Identify situations of eye health care system in Nepal.</li> </ol>	<ol> <li>Definition, characteristics, and purpose of a health care system.</li> <li>History of health system in Nepal.</li> <li>Health care approaches:         <ul> <li>Ayurvedic</li> <li>Homeopathic</li> <li>Allopathic</li> <li>Naturopathy, Acupuncture</li> </ul> </li> <li>History of Eye Health care services in Nepal</li> <li>Current Health care system of Nepal</li> </ol>
Examination methods: written exams (short answer questions) Unit 3: Eye Centre Management	Teaching / Learning Activities: textbook self-study - classroom instruction Hrs. theory: 24
Sub-unit 3.1: Training	Hrs. theory: 4
Objectives:	Content:
<ol> <li>State the purpose and definition of training.</li> <li>Describe different types of training and tell the advantages and disadvantages of each.</li> <li>Explain the process for assessing the need for training.</li> <li>Describe planning, conduction &amp; evaluation of the training program of subordinate &amp; volunteers</li> </ol>	<ol> <li>Definition of training.</li> <li>Difference education and training</li> <li>Different types of training.</li> <li>Training Need Assessment (TNA).</li> <li>Importance of training.</li> <li>Training plan, training conduction &amp; training evaluation focus on Primary eye care training</li> </ol>
<b>Examination methods:</b> written exams (short	Teaching / Learning Activities: textbook self-study
answer questions)	- Classroom instruction, field visit
Unit 3: Eye Centre Management	
Sub-unit 3.2: Conduct staff meeting	Hrs. theory: 2
Objectives:	Content:
<ol> <li>Identify the need for a meeting.</li> <li>Describe planning and organizing for an effective meeting.</li> </ol>	<ol> <li>Importance of maintaining good communication through meetings.</li> <li>Planning and organizing a meeting.</li> </ol>
Examination methods: written exams (short	Teaching / Learning Activities: textbook self-study
answer questions)	- Samples of meeting minutes/invitation letters, practice writing minutes from a simulated meeting Classroom instruction, Demonstration / Practicum

<b>Unit 3: Eye Centre Management</b>	
Sub-unit 3.3: Inventory & Logistic	Hrs. theory: 6
	•
<ol> <li>management</li> <li>Describe the purpose and process of physical inventory.</li> <li>Differentiate between expendable and non-expendable goods.</li> <li>Define storage and store standard.</li> <li>Describe the procedure for Cold Chain storage of medical supplies.</li> <li>Discuss the essential data of logistics information.</li> <li>Describe the process of calculating and demanding items, for both regular and emergency needs.</li> <li>Describe the process of distributing commodities.</li> <li>Explain the purpose of logistics management.</li> <li>Describe the Logistic Management Information System (LMIS) practice in Nepal.</li> <li>Describe the "six rights" of logistic management.</li> <li>Explain logistic cycle.</li> </ol>	<ol> <li>Inventory goals and procedures.</li> <li>Classifications of materials.</li> <li>Specialized storage treatment for essential drugs, eye drops, ointments, equipment/instruments.</li> <li>Essential data concepts:         <ul> <li>a. Maximum/minimum stock levels</li> <li>b. Authorized stock level and emergency order point</li> <li>c. Lead time stocking</li> <li>d. Losses/adjustments</li> </ul> </li> <li>Emergency and regular calculation and procurement of commodities.</li> <li>Procedures for distribution of commodities.</li> <li>LIFO/FIFO procedure</li> <li>Definition and function of logistic management.</li> <li>Six" rights of logistic management.</li> <li>Logistic cycle (Serving customer, product selection forecasting and procurement and inventory management).</li> <li>Stock book maintaining procedure</li> <li>Stock keeping of Optical lenses and frames</li> </ol>
, ,	
Examination methods: written exams (short answer questions	Teaching / Learning Activities: Classroom instruction, discussion, Acts and Regulations related to financial and administrative matters.
Unit 3: Eye Centre Management	TT d
Sub-unit 3.4 Time Management	Hrs. theory: 2
Objectives:	Content:
<ol> <li>Describe how to compute staff work load.</li> <li>Prepare a timetable of program &amp; activities.         <ul> <li>Weekly</li> <li>Monthly</li> <li>Quarterly</li> <li>Yearly</li> </ul> </li> </ol>	<ol> <li>Concept of time management.</li> <li>Tools of time management with example.</li> </ol>
Examination methods: written exams (short answer questions)	Teaching / Learning Activities: textbook self-study - Classroom instruction, Practicum, visit institution, Classroom practice.

Unit 3: Eye Centre Management	
Sub-unit 3.5: Health Management Information System (HMIS) and Medial record	Hrs. theory: 4
Objectives:  1. Explain the purpose of the MIS and HMIS.  2. Identify the important banefits of this	Content:  1. Function and purpose of MIS and HMIS.  2. importance of HMIS.
<ol> <li>Identify the important benefits of this system.</li> <li>Describe process of HMIS</li> <li>Explain the use of the different types of HMIS forms.</li> </ol>	<ol> <li>importance of HMIS</li> <li>The Process of HMIS with example</li> <li>Application of the HMIS forms.</li> <li>Differences between types of records and reports.</li> </ol>
<ul><li>5. Describe the use of the HMIS records and reports.</li><li>6. Demonstrate how to prepare monthly, quarterly, and annual HMIS reports.</li><li>7. Formulate Monthly and annual report</li></ul>	6. Monthly, quarterly & annual health reporting system
<b>Examination methods:</b> written exams (short answer questions)	<b>Teaching / Learning Activities:</b> Text book self- study, Classroom instruction, classroom practice, field visit to relevant health institutions
<b>Unit 3: Eye Centre Management</b>	
Sub-unit 3.6: Quality assurance	Hrs. theory: 6
Objectives:	Content:
<ol> <li>Compare different definitions of quality health care.</li> <li>Identify reasons for using the quality assurance (QA) program.</li> <li>Define the term "standards" and give examples of health care standards.</li> <li>List the ways that standards help to close the gap between actual performance and desired outcomes.</li> <li>Give examples of ways to improve patient satisfaction with services.</li> <li>Use the methods and principles of QA to identify and plan a solution to a real health care problem.</li> </ol>	<ol> <li>Components and concepts of quality health care.</li> <li>Rationale for quality assurance implementation.</li> <li>The focus of quality assurance principles:         <ol> <li>Focus on patient/staff needs</li> <li>Focus on how things are done</li></ol></li></ol>
Examination methods: written exams (short	Teaching / Learning Activities: Classroom
answer questions)	instruction, field visit,

Unit 4: Eye Health Policy and Plan Hrs. theory: 6			
Sub-unit 4.1: Eye Health Policy and Program	m Hrs. theory: 6		
Objectives:	Content:		
1. Describe the components of Eye Health Policy 2074.	1. Current Eye Health Policy (Objective, targets and components).		
2. Describe the current and periodic eye health plan.	2. Objectives, targets and activities (to be carried out at eye centre level) of National eye health		
3. Identify the objectives, targets and activities of eye health programmes	programs eg: a. Diabetic Retinopathy Program		
4. Mention the names of multilateral, bilateral, INGOs and NGOs activating in the eye	<ul><li>b. Blindness alleviation Program</li><li>3. Organization working in eye health sector in</li></ul>		
health sector of Nepal	Nepal		
Examination methods: written exams (short	Teaching / Learning Activities: Classroom		
answer questions)	instruction, field visit,		
Unit 5: Eye Health Human Resource in Nepal	Hrs. theory: 4		
Sub-unit 5.1: Development of Human	Hrs. theory: 4		
Resources in Eye Health Sector in Nepal			
Objectives:	Content:		
1. Describe the Role of various Eye Health	1. EHHR positions in Nepal: Ophthalmologist,		
Human resource (EHHR)R in Nepal	Optometrist, Ophthalmic officer, Ophthalmic		
2. Mention the institutions involved in EHHR	assistant, Eye Health Worker, Eye healer, Lab		
Development in Nepal.	Technologist, Ocularist, Optical Dispenser,		
3. Prepare JD of OA	Counselor, Pharmacy Assistant and Pharmacist.		
	2. Prepare & explain Job description of		
F	Ophthalmic Assistant		
<b>Examination methods:</b> written exams (short	<b>Teaching / Learning Activities:</b> Classroom instruction, relevant literature and brochures of		
answer questions)	concerned institutions, field visit to selected institute.		
Unit 6: Health Issues and Professional			
Practice	Hrs. theory: 8		
Sub-unit 6.1: Entrepreneurship	Hrs. theory: 8		
Objectives:	Content:		
Discuss the concept of entrepreneurship.	Goals and process of small business		
2. Discuss how the community and Eye Centre	establishment and management.		
might benefit if the Eye centre began a	2. Complimentary goals of small business and		
private profit making business in addition to	community welfare.		
his role as eye centre in charge	3. Business opportunities which meet community		
3. Identify the potential opportunities for	needs.		
unethical actions to occur when the In charge	4. Ethical considerations of entrepreneurship and		
of eye centre works simultaneously at two	role of In charge of eye centre.		
jobs.	5. Principles for moral examination to avoid		
4. Discuss ways to prevent unethical	conflict of interest situations		
occurrences by the entrepreneur.			
<b>Examination methods:</b> written exams (short	Teaching / Learning Activities: textbook self-		
answer questions)	study, Classroom instruction, assign a prepare a		
	business plan		

Unit 7: Health Care Law and Professional Councils	Th. Hrs: 6		
Sub Unit: 7.1 Health Care Law & Professional council	Th. Hrs: 6		
Objectives:	Contents:		
<ol> <li>List the health related law in Nepal</li> <li>List the professional council in health sector</li> <li>Mention the role of Nepal Health Professional Council (NHPC)</li> </ol>	<ol> <li>List out the existing health related law in Nepal</li> <li>Explain different professional councils in health sector</li> <li>Establishment and Formation of NHPC</li> </ol>		
4. Explain the function of NHPC	<ul> <li>4. Explain the objectives, role and function of NHPC</li> <li>5. Describe professional ethics and Code of conduct of a Ophthalmic Assistant</li> </ul>		

#### **Practical Tasks:**

# Practical Tasks: Students will perform at least following performance in class room settings. 39 hours

- 1. Conduct meeting and write a minute in simulative situation 2 hr
- 2. Write an official letter (invitation, demand for commodity, leave and submission letter) -2 hr
- 3. Prepare a duty roster 2 hr
- 4. Prepare a weekly/monthly report of eye centre- 4 hr
- 5. Prepare the tools for supervision 2 hr
- 6. Prepare a monitoring tool- 2hr
- 7. Prepare a evaluation tool- 2hr
- 8. Demonstrate journal voucher- 2hr
- 9. Prepare simple budget sheet- 4 hr
- 10. Prepare a sample job description- 2 hr
- 11. Make a goods register (Jinsi Khata)- 2hr
- 12. Formation of Operational/management and Management Committee 2 hr
- 13. Leave and process of having leave at eye centre level- 1 hr
- 14. Prepare a business plan for eye centre- 4 hr
- 15. Prepare a sample report- 4hr
- 16. Prepare sample stock book- 2 hr

## Ocular Disorder –II

Total: 117 hrs Theory: 117 hrs Practical: 0 hrs

### **Course Description**

This course enables the students to deal with the different mechanical and non mechanical injuries regarding their clinical features, diagnosis and treatment modalities. This course also guides students to perform first aid management and the urgent referral for the case for surgical management. This course also gives knowledge about the different causes of sudden loss of vision, its clinical features and management.

## **Course objectives**

At the end of the course, the students will be able to:

- 1. Perform the history taking, clinical examination, diagnosis and provide the available treatment.
- 2. Decide to perform the referral in cases of ocular trauma (both mechanical and non mechanical).
- 3. Gain the sound clinical knowledge as they can be competent enough for the various primary treatment of the different eye conditions especially related to the eye.

#### **Reference text books**

1. 'Anatomy and physiology of the eye' by A K Khurana- JP enterprises current edition

#### Reference book

- 1. 'Parson's diseases of the eye Ramanjit Sihota and Radhika Tandon- Elsevier'22<sup>nd</sup>edition
- 2. 'Clinical ophthalmology' by Brad bowling8th edition

#### **COURSE CONTENT**

Unit 1: Closed globe injury	Theory: 40hrs	
Objectives:	Content:	
<ol> <li>Describe the symptoms of corneal and conjunctival foreign body.</li> <li>Demonstrate the clinical examination of conjunctiva with eversion and double eversion.</li> <li>Demonstrate the clinical examination of cornea in cases of trauma with foreign body.</li> <li>Perform corneal staining in cases of corneal abrasion with underlying foreign body.</li> <li>Describe the symptoms of lid and adenexal trauma.</li> <li>Demonstrate the clinical examination of lids and adenexae in cases of mechanical and non mechanical trauma.</li> <li>Develop the competency to decide for the</li> </ol>	<ul> <li>Mechanical injuries         <ol> <li>Extra ocular foreign body:</li></ol></li></ul>	

	10.1 0 1 1 1 1	T		
	needful referral to the higher centres.			
	Able to provide first aid treatment			
9.	Able to know when and whom to refer and			
counsel of the patients				
<b>Evaluation methods:</b> written exam, viva,		Teaching / Learning Activities /		
pei	rformance observation in clinical setting	<b>Resources:</b> classroom instruction, practice in		
		a simulated setting, supervised clinical		
		practice		
	nit 2: Open globe injury -I	Theory: 20 hrs		
Ot	ojectives:	Content:		
1.	Describe different types of Perforating eye			
	injuries.	1. Perforating eye injuries: corneal, scleral		
2.	Describe about clinical features of Perforating	and corneo-scleral		
	eye injuries with / without retained intraocular	2. Perforating eye injuries with/ without		
	FB.	retained intraocular FB-clinical features,		
3.	Discuss on issues regarding diagnosis and	diagnosis and referral		
	referral for Perforating eye injuries.	3. Non mechanical injuries		
4.	Describe different types of non mechanical	a.Chemical injury – acid/ alkali		
	injuries.	b.Thermal		
		c.Electrical		
		d. Radiational		
Ev	raluation methods: written exam, viva,	Teaching / Learning Activities /		
pei	rformance observation in clinical setting	<b>Resources:</b> classroom instruction, practice in		
		a simulated setting, supervised clinical		
		practice		
Un	nit 3: Open globe injury -II	Theory: 20hrs Lab/practical: hrs		
Ot	ojectives:	Content:		
		1. Signs and symptoms of Perforating eye		
1.	Describe the symptoms and signs of perforating	injuries corneal, scleral or corneo-scleral.		
	eye injuries.	2. Signs and symptoms of Perforating eye		
2.	Demonstrate the torch light and slit lamp	injuries with or without retained		
	examination of perforating eye injuries.	intraocular FB		
3.	Perform the first aid management of the	3. Non mechanical injuries		
	perforating eye injuries	i. Clinical features, grading and		
4.	Counseling of the patients of perforating eye	management of chemical injuries.		
	injuries	ii. Clinical features and treatment of		
5.	Decide the referral of the perforating eye	thermal injuries.		
	injuries to higher eye centers.	iii. Clinical features and treatment of		
6.	Describe the symptoms and signs of acids and	Electrical injuries.		
	alkali injuries.	iv. Clinical features and treatment of		
7.	Differentiate between acid and alkali injuries.	Radiational injuries.		
8.	State the management of acid and alkali			
	injuries.			
9.	Describe the measures of first aid management			
	of acid and alkali injuries.			

10. Describe the preventive measures to avoid the chemical and non chemical eye injuries.		
<b>Evaluation methods:</b> written exam, viva, performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated setting, supervised clinical practice	
Unit 4: Sudden loss of vision.	Theory: 37 hrs Lab/practical: hrs	
Objectives:	Content:	
<ol> <li>Enlist causes of sudden loss of vision</li> <li>Mention the types of Retinal detachment.</li> <li>Define Retinal detachment.</li> <li>Discuss the causes, symptoms and signs of Rhegmatogenous, Exudative and tractional detachment.</li> <li>Define Endophthalmitis.</li> <li>List the causes of Endophthalmitis.</li> <li>List the symptoms and signs of Endophthalmitis.</li> <li>List the clinical features and management of CRAO.</li> <li>Define Panophthalmitis.</li> <li>Discuss the causes and clinical features of Panophthalmitis.</li> <li>Define acute angle closure glaucoma.</li> <li>List the causes and clinical features of acute angle closure glaucoma.</li> </ol>	Causes of Sudden loss of vision     Sudden losss of vision:         i. Clinical features and management of Retinal detachment.         ii. Clinical features and management of Endophthalmitis.         iii. Clinical features and management of CRAO.         iv. Clinical features and management of acute angle closure glaucoma.	
<b>Evaluation methods:</b> written exam, viva, performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated setting, supervised clinical practice	

## **Community Ophthalmology- II**

(Foundations of Health Education, Health Promotion and eye health research)

Total: 195 hrs Theory: 117 hrs Practical: 78 hrs

Part I: Foundations of Health Education and Health Promotion

Part II: Research Strategy and community diagnosis

#### **Course Description**

#### Part I: (Theory 78 hrs + Practical 39 hrs)

This course teaches the educational aspects of public health management, which is an indispensable component for preventive health, a chief responsibility primary eye care personnel. The course teaches the concepts and theories of health behaviors and the procedure for planning, implementation and overall management of eye/health education program. The aim of this course is to develop the necessary skills for effective application of health education at primary level of eye care services.

#### Part II: (Theory 39 hrs + Practical 39 hrs)

This course also comprises on comprehensive idea and be able to explain research and epidemiological aspects, concept importance, type of research carried out in eye health, interpret the research findings and perform community diagnosis as practical of health need assessment.

### **Objectives**

At the end of the course, the students will be able to:

- 1. Appreciate the significance of health education and health promotion in preventive, promotive, curative and rehabilitative health care.
- 2. Identify and apply the theories and principles of health behavioral sciences in the process of Health education.
- 3. Identify, select and utilize suitable health education and health promotion methods and
- 4. Media for successful implementation of health service programs.
- 5. Plan, implement and evaluate health education and health promotion programs.

#### **Recommended Textbooks**

- 1. Pradhan, H.B., A textbook of Health Education. Educational Resources for Health, 1995.
- 2. Park, J.E. and Park, K., Textbook of Social and Preventive Medicine (20th ed.) 1997.

## **COURSE CONTENT**

COURSE CONTENT	T			
Course Part I: Foundations of Health Education and Health Promotion	Hrs. theory	y: 78	Hrs. lab:	39
Unit 1: Introduction to health education	Theory:	24 hrs	S	Hrs. lab: 39
1.1: Overview of health education	Theory:	4 hrs		
Objectives:	Content:			
1. Discuss the aims of health education.	1. Purpose	and ob	jectives of	health
2. Identify factors which influence health, and will	education.	•	,	
therefore influence health education.	2. Definitio	n of he	ealth educa	tion.
3. Give examples of the way each factor can affect	3. Factors in	nfluen	cing health	:
health.	i) Heredi		8	
4. Discuss the significance of health education in	ii) Enviro	•	t	
preventive, promotive, curative and rehabilitative	iii) life st			
health care.	,	•	omic and c	ultural condition
5. Give an example of how health education can	v) health			
help prevent disease.	· /			ronmental
6. Give an example of how health education helps	factors.	партисс	una en 1	
in curing a disease.	ractors.			
7. Give an example of how health education can				
prevent disease.				
Evaluation methods: written exam, viva,	Teaching /	Learn	ing Activi	ties /
performance observation in clinical setting				ection, practice in
performance observation in enimear setting	a simulated			_
	practice	Setting	5, super vis	ca chinear
1.2: Principles and scope of health education	-	4 hrs		
Objectives:	Content:			
1. Describe the scope of health education.	1. Scope of	health	education	
2. Explain the principles of health education; give	2. Principle			
an example for each one.	_			
3. Discuss which heath post staffs are responsible	3. Persons responsible for health education.			
for health education.				
4. Tell how the health assistant can promote health				
education at the health post				
<b>Evaluation methods:</b> written exam, viva,	Teaching /	Learn	ing Activi	ties /
performance observation in clinical setting				iction, practice in
performance observation in eliminal setting	a simulated			
	practice	South	5, super (15	ca chinear
1.3: Methods	-	hre		
Objectives:	Theory: 6 hrs Content:			
1. Describe the advantages and disadvantages of		g and	definition (	of methods of
the different types of health education media.	health e	_		n memous or
2. Identify criteria used for selecting appropriate				ntages of each
media for a method of providing education.		_	iu uisauval	mages of Each
3. Select the appropriate media for health	method.			nethod effective
education programmes.	th 3. Measures to make each method effective Individual method: Interview,			
r – EUUCALIOH DEOYFAIIIIIES.		uai iliel		
4. Describe how to prepare and use audio and	Counse		mod. mici	view,

visual aids.	4. Group methods: Group discussion, Field trip demonstration, Role-play, brainstorming, symposium, workshop and mini-lecture.	
Evaluation methods: written exam, viva, performance observation in clinical setting	Teaching / Learning Activities / Resources: classroom instruction, practice in a simulated setting, supervised clinical practice	
1.4: Mass methods	Theory: 4 hrs	
Objectives:	Content:	
Describe the methods for providing education to large groups of people.     Identify the advantages and disadvantages of each method.  Evaluation methods: written exam, viva, performance observation in clinical setting	Mass method: Lecture, Exhibition,     Campaign     Criteria for the selection of appropriate methods.      Teaching / Learning Activities /     Resources: classroom instruction, practice in a simulated setting, supervised clinical practice	
1.5 : Overview of Media	Theory: 6 hrs	
Objectives:	Content:	
<ul> <li>5. Describe the advantages and disadvantages of the different types of health education media.</li> <li>6. Identify criteria used for selecting appropriate media for a method of providing education.</li> <li>7. Select the appropriate media for health education programmes.</li> <li>8. Describe how to prepare and use audio and visual aids.</li> </ul>	<ol> <li>Meaning of each media:         <ul> <li>a. Audio aids: radio cassette player.</li> <li>b. Visual aids: poster, pamphlet, flip chart, model, real objects, bulletin board, wall chart, flannel graph.</li> <li>c. Audio visual aids: TV, multimedia projector</li> </ul> </li> <li>Uses of each media.</li> <li>Criteria for the selection of media.</li> <li>Process of preparing each media.</li> <li>Measures to use each media effectively.</li> </ol>	
<b>Evaluation methods:</b> written exam, viva,	Teaching / Learning Activities /	
performance observation in clinical setting	Resources: classroom instruction, supervised clinical practice	
Unit 2: Fundamental Factors of Health	Theory: 5 hrs	
Education		
2.1: Communication	Theory: 5 hrs	
Objectives:	Content:	
<ol> <li>Define communication.</li> <li>Discuss types of communication.</li> <li>Discuss principles of communication.</li> <li>List the basic elements of communication.</li> <li>Identify barriers of communication.</li> </ol>	<ol> <li>Scope of communication.</li> <li>Importance of communication.</li> <li>Principles of communication.</li> <li>Ways of communication.</li> <li>Methods of communication</li> </ol>	

Evaluation methods: written exam, viva,	Teaching / Learning Activities /		
performance observation in clinical setting	Resources: classroom instruction,		
	supervised clinical practice		
Unit 3: Health education material	Theory: 8 hrs Lab/practical: 5 h		
3.1: Overview of Material	Theory: 8 hrs	Lab/practical: 5 hrs	
Objectives:	<b>Content:</b>		
1. Describe the materials for providing education	1. Resources for community education		
Identify the advantages and disadvantages of each	materials.		
material.	2. Procedures for developing simple media		
2. Collect health education materials from different			
Organizations.			
3. Prepare simple media for health education			
a. Poster			
b. Pamphlet			
c. Flip chart			
d. Flannel graph			
<b>Evaluation methods:</b> written exam, viva,	Teaching / Learning		
performance observation in clinical setting	<b>Resources:</b> classroom	*	
	supervised clinical practice		
<b>Unit 4: Implementation of Health Education</b>	Theory: 4 hrs	Lab/practical: 10	
Programs		hrs	
4.1: practice of health education methods, Media	Theory: 4 hrs	practical: 10hrs	
and Material.	G		
Objectives:	Content:	1.0	
1. Identify the important characteristics of the	1. Apply theory learn	ned from previous	
following health education methods in the	lessons.		
Classroom.			
2. Practice using these methods in classroom.			
3. Use these one or more of these methods			
effectively in the health education program:			
a. Counseling			
b. Group discussion			
c. Role play d. Demonstration			
e. Classroom instruction, textbook.			
handouts, group discussion			
f. Exhibition.			
Evaluation methods: written exam, viva,		A 4° *4° /	
	L'Eggching / Lagraina	r Activities /	
	Teaching / Learning	9	
performance observation in clinical setting	Resources: classroom supervised clinical pro-	m instruction,	

Unit 5: Fundamental Factors of Health	Theory: 16 hrs		
Education			
5.1: Motivation	Theory: 4 hrs Lab/practical: 4 hrs		
Objectives:	Content:		
1. Identify the theories and principles of	1. Meaning and definition of motivation.		
motivation.	2. Kinds of motivation.		
2. Apply the theories and principles of motivation	a. Instinct b. Intrinsic		
in the process of health education.	3. Principles of motivation.		
3. Give an example of intrinsic and extrinsic motivation.	- Maslow's theory of human motivation		
4. Explain how you might encourage a person to	4. Importance of motivation in health		
quit smoking by applying the principles of	education.		
motivation.	caucation.		
5. Tell how to apply a theory of motivation to a			
health education class on dental care.			
Evaluation methods: written exam, viva,	Teaching / Learning Activities /		
performance observation in clinical setting	Resources: classroom instruction,		
	supervised clinical practice		
5.2: Learning	Theory: 7 hrs		
Objectives:	Content:		
1. Describe the steps of the learning process.	1. Meaning and definition of learning.		
2. Discuss factors which increase or decrease	2. Ralph Gary's principle of learning.		
learning.	3. Ways of learning.		
3. Explain the theories and principles of learning.	4. Steps of learning process.		
4. Give an example to illustrate the principle	5. Factors affecting learning:		
"relevancy improves learning" when teaching the	- Biological factors such as age, condition		
mother of a newborn.	of sensory organs.		
5. Apply other principles of learning to health	- Physical factors		
education situations.	- Socio-cultural factors		
6. Describe the different ways of learning.	- Psychological factors		
7. Identify your own ways of learning.	6. Ways of learning:		
8. Describe the best way to teach "tooth brushing"	- Learning by hearing.		
to someone who learns by hearing; by seeing; by			
doing.	- Learning by doing		
9. State Ralph Gary's principle of learning; give an	- Learning by repetition		
example of this.	- Learning by imitation.		
Evaluation methods: written exam, viva,	Teaching / Learning Activities /		
performance observation in clinical setting	Resources: classroom instruction,		
portormance observation in clinical setting	supervised clinical practice		
	supervised elimiear practice		

5.3: Change process	Theory: 5 hrs	
Objectives:	Content:	
1. Explain the theories of change process.	1. Concept of change and change process.	
2. Describe how change process is part of health	2. Ways of bringing change:	
education.	8. Change by force	
3. Identify one health behavior which is best	9. Change by identificati	on
changed by force.	10. Change by internalization	ation.
4. Identify one health behavior which illustrates a	3. Resistance to change.	
change made by identification.	4. Ways of overcoming t	he resistances.
Evaluation methods: written exam, viva,	Teaching / Learning Ac	ctivities /
performance observation in clinical setting	Resources: classroom in	struction,
	supervised clinical practi	
Unit 6: Planning of Health Education	Theory: 16 hrs	Lab/practical: 8
Programmes		hrs
6.1: Principles of planning	Theory: 6 hrs	
Objectives:	Content:	
1. Describe the need for planned health education	1. Definition concept and	-
programmes.	planning of health education programme.	
2. Give examples of useful data collection for	2. Steps of planning:	
selecting a needed educational programme.	a. Collection of data and information	
3. State an example showing how to set priorities of		
health education needs.	needs on priority basis.	
4. Differentiate between general and specific	c. Setting goals and objectives: General	
objectives.	objective and Specific objective.	
5. Describe ways to decide what and how much to	d. Identification of target group.	
teach in an educational programme.	e. Selection of appropriate methods and	
6. Identification of target groups.	media of health education.	
7. Selection of appropriate methods and media of health education.	f. Identification of necessary and available resources.	
8. Identification of necessary and available	g. Development of detailed plan of	
resources.	evaluation. E.g. time evaluation, criteria	
9. Development of details plan of evaluation eg.	evaluation and method	
Time, criteria and methods of evaluation.	3. Development of conte	nts.
Evaluation methods: written exam, viva,	Teaching / Learning Ac	ctivities /
performance observation in clinical setting	Resources: classroom in	
	supervised clinical practi	ce

6.2 Application of planning	Theory: 5hrs Lab/practical: 4 hrs		
Objectives:	Content:		
1. Describe what is meant by "target group" and	1. Development of contents to teach		
give an example.	2. Identification of target group.		
2. Discuss resources available to the community	3. Selection of appropriate methods and		
eye centre.	media of		
3. Explain the importance of making plans with	Health education.		
sufficient detail.	4. Identification of necessary and available		
4. Identify criteria and methods for evaluating a	Resources.		
programme.	5. Development of a detail plan for		
5. Use all the components of planning to plan a	evaluation.		
health education programme.	a. time of evaluation.		
	b. criteria of evaluation .		
	c. methods of evaluation.		
Evaluation methods: written exam, viva,	Teaching / Learning Activities /		
performance observation in clinical setting	Resources: classroom instruction,		
	supervised clinical practice		
6.3: Principles of implementation	Theory: 5 hrs Lab/practical: 4 hrs		
Objectives:	Content:		
	1. Implementation and its strategies.		
1. State the strategies of implementation.	_		
2. Give examples of ways to build commitment for	a) Building commitment		
2. Give examples of ways to build commitment for a program on vitamin A distribution.	a) Building commitment     b) Training of manpower		
<ul><li>2. Give examples of ways to build commitment for a program on vitamin A distribution.</li><li>3. Describe ways of training manpower for a</li></ul>	<ul><li>a) Building commitment</li><li>b) Training of manpower</li><li>c) Mobilizing resources</li></ul>		
<ol> <li>Give examples of ways to build commitment for a program on vitamin A distribution.</li> <li>Describe ways of training manpower for a program on vitamin A distribution.</li> </ol>	<ul><li>a) Building commitment</li><li>b) Training of manpower</li><li>c) Mobilizing resources</li><li>d) Organizing community</li></ul>		
<ol> <li>Give examples of ways to build commitment for a program on vitamin A distribution.</li> <li>Describe ways of training manpower for a program on vitamin A distribution.</li> <li>Identify some local or national resources for a</li> </ol>	<ul> <li>a) Building commitment</li> <li>b) Training of manpower</li> <li>c) Mobilizing resources</li> <li>d) Organizing community</li> <li>e) Monitoring of the program.</li> </ul>		
<ol> <li>Give examples of ways to build commitment for a program on vitamin A distribution.</li> <li>Describe ways of training manpower for a program on vitamin A distribution.</li> <li>Identify some local or national resources for a vitamin A distribution program.</li> </ol>	<ul> <li>a) Building commitment</li> <li>b) Training of manpower</li> <li>c) Mobilizing resources</li> <li>d) Organizing community</li> <li>e) Monitoring of the program.</li> <li>f) Supervision of health education workers</li> </ul>		
<ol> <li>Give examples of ways to build commitment for a program on vitamin A distribution.</li> <li>Describe ways of training manpower for a program on vitamin A distribution.</li> <li>Identify some local or national resources for a vitamin A distribution program.</li> <li>Tell how a community eye centre in charge</li> </ol>	<ul> <li>a) Building commitment</li> <li>b) Training of manpower</li> <li>c) Mobilizing resources</li> <li>d) Organizing community</li> <li>e) Monitoring of the program.</li> <li>f) Supervision of health education workers</li> <li>g) Recording and reporting</li> </ul>		
<ol> <li>Give examples of ways to build commitment for a program on vitamin A distribution.</li> <li>Describe ways of training manpower for a program on vitamin A distribution.</li> <li>Identify some local or national resources for a vitamin A distribution program.</li> </ol>	<ul> <li>a) Building commitment</li> <li>b) Training of manpower</li> <li>c) Mobilizing resources</li> <li>d) Organizing community</li> <li>e) Monitoring of the program.</li> <li>f) Supervision of health education workers</li> <li>g) Recording and reporting</li> <li>2. Training of Human Resources</li> </ul>		
<ol> <li>Give examples of ways to build commitment for a program on vitamin A distribution.</li> <li>Describe ways of training manpower for a program on vitamin A distribution.</li> <li>Identify some local or national resources for a vitamin A distribution program.</li> <li>Tell how a community eye centre in charge might monitor and Supervise the activities of workers for the program.</li> </ol>	a) Building commitment b) Training of manpower c) Mobilizing resources d) Organizing community e) Monitoring of the program. f) Supervision of health education workers g) Recording and reporting 2. Training of Human Resources 3. Community Organization		
<ol> <li>Give examples of ways to build commitment for a program on vitamin A distribution.</li> <li>Describe ways of training manpower for a program on vitamin A distribution.</li> <li>Identify some local or national resources for a vitamin A distribution program.</li> <li>Tell how a community eye centre in charge might monitor and Supervise the activities of workers for the program.</li> <li>Explain why recording and reporting of program</li> </ol>	<ul> <li>a) Building commitment</li> <li>b) Training of manpower</li> <li>c) Mobilizing resources</li> <li>d) Organizing community</li> <li>e) Monitoring of the program.</li> <li>f) Supervision of health education workers</li> <li>g) Recording and reporting</li> <li>2. Training of Human Resources</li> </ul>		
<ol> <li>Give examples of ways to build commitment for a program on vitamin A distribution.</li> <li>Describe ways of training manpower for a program on vitamin A distribution.</li> <li>Identify some local or national resources for a vitamin A distribution program.</li> <li>Tell how a community eye centre in charge might monitor and Supervise the activities of workers for the program.</li> <li>Explain why recording and reporting of program results are important.</li> </ol>	a) Building commitment b) Training of manpower c) Mobilizing resources d) Organizing community e) Monitoring of the program. f) Supervision of health education workers g) Recording and reporting 2. Training of Human Resources 3. Community Organization 4. Evaluation of Health Education		
<ol> <li>Give examples of ways to build commitment for a program on vitamin A distribution.</li> <li>Describe ways of training manpower for a program on vitamin A distribution.</li> <li>Identify some local or national resources for a vitamin A distribution program.</li> <li>Tell how a community eye centre in charge might monitor and Supervise the activities of workers for the program.</li> <li>Explain why recording and reporting of program results are important.</li> </ol> Evaluation methods: written exam, viva,	a) Building commitment b) Training of manpower c) Mobilizing resources d) Organizing community e) Monitoring of the program. f) Supervision of health education workers g) Recording and reporting 2. Training of Human Resources 3. Community Organization 4. Evaluation of Health Education  Teaching / Learning Activities /		
<ol> <li>Give examples of ways to build commitment for a program on vitamin A distribution.</li> <li>Describe ways of training manpower for a program on vitamin A distribution.</li> <li>Identify some local or national resources for a vitamin A distribution program.</li> <li>Tell how a community eye centre in charge might monitor and Supervise the activities of workers for the program.</li> <li>Explain why recording and reporting of program results are important.</li> </ol>	a) Building commitment b) Training of manpower c) Mobilizing resources d) Organizing community e) Monitoring of the program. f) Supervision of health education workers g) Recording and reporting 2. Training of Human Resources 3. Community Organization 4. Evaluation of Health Education		

<b>Course: Foundations of Health Education and</b>	Hrs. theory
Health Promotion	
Unit 7: Health Promotion	Theory: 7 hrs
7.1: Health Promotion	Theory: 7 hrs
Objectives: Students will be able to	Content:
1. Define the term health promotion.	Class discussion and presentation on
2. Find out the scope of health promotion.	1. Definition of health promotion.
3. Identify the principles of health promotion	2. Scopes of health promotion
4. Discuss on Ottawa Charter	3. Principles of health promotion
	4. Ottawa charter
<b>Evaluation methods:</b> written exam, viva,	Teaching / Learning Activities /
performance observation in clinical setting	Resources: classroom instruction,
_	supervised clinical practice

Part II : Eye Health Research and Community diagnosis	Hrs. theory: 39 Hrs. Field: 39
Unit 1: Foundation of eye health research	Hrs. theory: 10
Objectives:	Contents:
Explain research and epidemiological aspects, concept importance and type of research carried out in eye health.	<ol> <li>Definition, characteristics and purpose of health research and its importance in midlevel human resources in eye health.</li> <li>Types of research: descriptive: Population based surveys (Cross sectional), Rapid Assessment of Avoidable Blindness, Trachoma Rapid Assessment, Analytic: Case Control and cohort studies and Experimental (Clinical trial).</li> <li>Definition of terminology used in eye health research such as: disease prevalence, incidence, endemic, epidemic etc.</li> <li>Selection of appropriate reviewing the literature, formulation of research objectives and question, design basic research protocol for a cross sectional study.</li> </ol>
<b>Evaluation methods:</b> Written examination, Performance observation, oral test	Teaching / Learning Activities: Lectures
Unit 2: Basic research methodology	Hrs. theory: 14
Objectives:	Content:
Enumerate type of research carried out in eye health and its survey methodology.  a. Define different between observational and experimental research  b. Enumerate sampling procedure  c. Explain source and type of data  d. Differentiate Qualitative and quantitative research method  e. Explain different types of data collection methods  f. Explain Data management and analysis in eye health research.	<ul> <li>Design of observational and experimental research</li> <li>Sampling methods- probability and non-probability</li> <li>Instrumentation (techniques and tools of research)</li> <li>Source and types of data (source: primary and secondary, types: qualitative and quantitative)</li> <li>Rapid method and in-depth method and different types of tools for data collection-using available information, interview, observation, focus group discussion etc.</li> <li>Data management and analysis (editing, coding, recoding, classification, data entry, cleaning, summary: tabulation (frequency analysis, mean median, mode and graph).</li> <li>Conclusion, summary and recommendations based on the findings</li> </ul>
<b>Evaluation methods:</b> Written examination, Performance observation, oral test	Teaching / Learning Activities: Lectures

Unit 3: Assessing health needs (Community Diagnosis	Hrs. theory: 15	
Objectives:	Content:	
Perform followings:  a. Design community diagnosis and presentation of findings  b. Perform Community diagnosis and planning, implementation and evaluation of micro eye health project  c. Practical exposure of community diagnosis in field.  d. Field work for minimum 2 weeks	<ol> <li>Content:         <ol> <li>Definition of community, definition, concept, importance and use of community diagnosis, process of community diagnosis</li> <li>FACT- facilities available in the community, knowledge, attitudes, practices, constraints of community diagnosis, training for community people.</li> <li>Methods of community diagnosis- design, target population, sample size, sampling, data collection techniques and tools, data management, analysis and prioritization of eye health problems.</li> </ol> </li> <li>Planning, implementation and evaluation of micro eye health projects.</li> <li>Presentation and recommendation of the community health needs.</li> <li>Basic computer skills: MS word and excel</li> </ol>	
<b>Evaluation methods:</b> Report evaluation, presentation skills, and oral test	Teaching / Learning Activities: field	
Unit 4: Community diagnosis (field study/practical)	Practical hrs: 39	
Objectives:	Content:	
Conduct field study on various eye heath issue and problems in particular community and prepare report	<ol> <li>Identification of an existing eye health problem in particular community</li> <li>Planning and preparation of field study in community</li> <li>Report writing based on prescribed format</li> <li>Application of Methodology for field study</li> <li>Analysis of data, summary, conclusion and recommendation of study</li> </ol>	
<b>Evaluation methods:</b> Written examination, Class	Teaching / Learning Activities:	
Performance, observation and Viva voce	Lectures	

## **Low Vision and Optical Dispensing**

Total: 117 hrs Theory: 78 hrs Practical: 39 hrs

### **Course Description**

This course provides the students with knowledge and skill on low vision and ophthalmic dispensing. This course is designed to develop basic but comprehensive knowledge on clinical and functional assessment and rehabilitation of low vision clients and basic ophthalmic dispensing procedures.

## **Course objectives**

At the end of the course, the students will be able to:

- 1. Define low vision and visual impairment
- 2. Perform clinical assessment, functional assessment and rehabilitation of low vision clients
- 3. Read spectacle prescription.
- 4. Identify different types of frame and lens material and do proper frame selection
- 5. Mark optical centre and determine lens power
- 6. Measure inter pupillary distance and perform basic progressive addition lens fitting measurement
- 7. Troubleshoot complaints and handle patient's questions.

#### **Recommended Texts**

- 1. Clinical optics, Fannin TE and Grosvenor, 1996
- 2. Clinical low vision, Faye E, Little Brown and company, 1984
- 3. The low vision Handbook, Barbara Brown
- 5. Principle of Ophthalmic lenses, Jalie M
- 6. Refraction, Duke Elder
- 7. Dictionary of Optometry, Millodot. M, 1993

#### **Reference Books**

- 1. The Essential of low vision practice, Richard L. Brillant
- 2. System of Ophthalmic dispensing, Clifford W. Brooks, Irvin M.Boorish
- 3. Clinical Visual optics, Bennette AG and Rabbetts RB, 1997
- 4. Primary Care Optometry, Grosvenor TP,1996

## **COURSE CONTENT**

Unit 1: Low vision	Theory: 33 hrs	Lab/practical: 15 hrs	
<b>Sub-unit 1.1: visual impairment and low</b>	Theory: 11 hrs	Lab/practical: 4 hrs	
vision			
Objectives:	<b>Content:</b>		
1. Describe visual impairment and low	1. Definition and o	category of Visual impairment -2	
vision	hours		
	2. Definition of lo	w vision-2 hours	
	3. Causes of low v	vision- 4 hours	
	4. Classification of Functional visual deficit in low		
	vision- 3 hours		
Evaluation methods: written exam, viva,	Teaching / Learni	ng Activities / Resources:	
performance observation in clinical setting	classroom instruction	on, practice in a simulated	
	setting, supervised	clinical practice	
Sub-unit 1.2 : low vision device	Theory: 7 hrs	Lab/practical: 3 hrs	
Objectives:	Content:		
1. Describe about optical and non optical	1. Near and far optical devices in low vision- 4		
devices	hour		
	2. Non-optical devices in low vision- 3 hours		
<b>Evaluation methods:</b> written exam, viva,		ng Activities / Resources:	
performance observation in clinical setting		on, practice in a simulated	
	setting, supervised clinical practice		
<b>Sub-unit 1.3: Basics in Prescribing low</b>	Theory: 6 hrs	Lab/practical: 2hrs	
vision device			
Objectives:	Content:		
1. Know basics in Prescribing low vision		basic prescription on low vision	
device	devices-6 hours		
Evaluation methods: written exam, viva,		ng Activities / Resources:	
performance observation in clinical setting		on, practice in a simulated	
	setting, supervised clinical practice		
Sub-unit 1.4: General approach to low	Theory: 9 hrs	Lab/practical: 6 hrs	
vision patient and management			
Objectives:	Content:		
1. Approach low vision patient and know		story taking and approach to a	
basic management procedures	patient with low vision – 3 hours  2. Know basic management options of patients visions.		
	low vision- 6 ho		
<b>Evaluation methods:</b> written exam, viva,	Teaching / Learning Activities / Resources:		
performance observation in clinical setting	classroom instruction, practice in a simulated setting, supervised clinical practice		
performance observation in enimear setting		-	

Unit 2: Optical dispensing	Theory:	45 hrs	Lab/practical: 24 hrs
Sub-unit 2.1 : Lens measurement	Theory:	11 hrs	Lab/practical: 7 hrs
Objectives:	Content:		•
<ol> <li>Know the Ways of IPD measurement</li> <li>Describe Ways of optical center marking.</li> <li>Determine lens power.</li> </ol>	<ol> <li>Monocular and binocular IPD measurement with scale and IPD ruler - 4hours</li> <li>(with pupilometer- 1 hour</li> <li>Identification of optical centre and marking with lensometer and without lensometer -3 hour)</li> <li>Geneva lens measure for surface power measurement-1 hour</li> <li>Determination of lens power by lensometry-4 hour</li> <li>Determination of lens power by hand neutralization-2 hour</li> </ol>		
Evaluation methods: written exam, viva,	Teaching /	Learning	Activities / Resources:
performance observation in clinical setting	classroom i	instruction	, supervised clinical practice
Sub-unit 2.2 : Frame ,lens material and lens design	Theory:	17 hrs	Lab/practical: 11 hrs
Objectives:	<b>Content:</b>		
1. Describe frame features	1. Frame	types and	nomenclature of frames2
2. Describe Frame selection	hour		
3. Describe lens material and design	2. Know a	about spec	cial frame feature and handing
4. Describe lens identification	the fran	mes2 hou	ur
5. Describe lens coating available	<ol> <li>Awareness of the dermatological effect of the materials to be able to advice patients accordingly -2 hour</li> <li>Relationship between frame, lenses and face shape - 2 hours</li> <li>Selection of frame on basis of occupation and age-2 hour</li> <li>Lens materials and design -1 hour</li> <li>Associated advantages and disadvantages-2hour</li> <li>Identification of Biconvex, Biconcave, Meniscus, planoconvex and planoconcave lens -2 hour</li> <li>Identification of tints and coating of lens surface and its application-2 hour</li> <li>Associated advantage and disadvantage-1hour</li> </ol>		
Evaluation methods: written exam, viva,	Teaching /	Learning	Activities / Resources:
performance observation in clinical setting	_	_	, supervised clinical practice

Sub-unit 2.3: Dispensing bifocal and	Theory 17 hrs Lab/practical: 6 hrs
progressive addition lens	
Objectives:	Content:
Describe type of Bifocals     Describe progressive addition lens dispensing	<ol> <li>Identification of Types of bifocal -2 hours</li> <li>Bifocal segment height/ segment inset and segment drop -2 hours</li> <li>Brief overview of PAL's and clinical decision making -2 hour</li> <li>Know basic construction of progressive addition lens-2 hour</li> <li>Frame selection for progressive- 2 hour</li> <li>Familiarity of different types of progressive lens design and clinical relevance, advantage and disadvantage of different types of lens2 hour</li> <li>Choosing right types of progressive lens -2 hour</li> <li>Progressive lens fitting measurement -3 hour</li> </ol>
	9. Familiarity of different brands of PAL's2 hour
Evaluation methods: written exam, viva,	Teaching / Learning Activities / Resources:
performance observation in clinical setting	classroom instruction, supervised clinical practice

## Clinical Practice –I

## (Hospital Based)

(Patient Examination and Diagnosis, Counseling, Vision, Refraction, Low Vision, Orthoptic)

Total: 390 hrs Theory: 0 hrs Practical: 390 hrs

## **Course Description**

Clinical Practice –I is a 390 hours (10 weeks/ 60 working days) program that aims to provide students an opportunity for meaningful career related experiences by working fulltime in real organizational settings where they can practice and expand upon their classroom based knowledge and skills before graduating. It will also help students gain a clearer sense of what they still need to learn and provides an opportunity to build professional networks. The course is designed to expose the students to develop the skills on general and ocular history taking, visual acuity measurements and refraction. This also provides exposure to different ocular pathological conditions and their management. It also provides additional skills on different types of binocular vision anomalies and vision therapy followed by low vision assessment. The student will be eligible for Clinical Practice-I only after the completion of all classes of the subjects included in the curriculum.

Clinical Practice-I should be completed at least 2 weeks before the start of 3<sup>rd</sup> year final examination of CTEVT. The institute will make arrangement for Clinical Practice-I. The institute will inform the CTEVT at least one month prior to the Clinical Practice-I placement date along with plan, schedule, the name of the students and their corresponding Clinical Practice-I site.

## **Course objectives**

At the end of the course, the students will be able to:

- Assess visual acuity
- Perform objective and subjective refraction
- Diagnose and managing ocular disease
- Refer if required
- Assess binocular vision and vision therapy
- Assess low vision and rehab

#### **Recommended Texts**

- Comprehensive ophthalmology; A.K. Khurana, 6<sup>th</sup> edition
- Theory and practice of optic and refraction; A.K. Khurana, 3<sup>rd</sup> edition
- Clinical orthoptics; Fiona J. Rowe, 3<sup>rd</sup> edition
- Strabismus Simplified; Pradeep Sharma, 2<sup>nd</sup> edition
- Low visions aids; Monica Chaudhary

#### **Reference Books**

- Primary care optometry; Theodor Grosvenor, 5<sup>th</sup> edition
- Clinical optics; Fannin TE and Grosvenor, 2<sup>nd</sup> edition
- Essentials of low vision practice; Richard L. Brilliant
- Binocular vision and ocular motility; Von Noorden, 5<sup>th</sup> edition

#### **Activities**

#### 1. Vision- 80 Hours

Students will be posted in vision room where they can learn different types of visual acuity tests for distance and near. This practice unit on vision is intended for developing skills on Visual Acuity (VA) for distance and near with and without correction.

#### 2. Refraction - 120 Hours

Students will be posted in refraction unit where they can learn different methods of objective and subjective refraction. This practice unit on refraction is intended for developing skills on Objective refraction and Subjective refraction.

#### 3. Patient Examination and Diagnosis, Counseling- 120 Hours

Students will be posted in examination room where they can learn General and ocular history taking, Torch light examination, Slit lamp Biomicroscopy, Distance Ophthalmoscopy, Direct and Indirect Ophthalmoscopy, Patient counseling and Patient referral. This practice unit on patient examination, diagnosis and counseling is intended for developing skills on History taking, General ocular examination, Diagnosis and management and Counseling and Referral.

#### 4. Low vision- 25 Hours

Students will be posted in examination room where they can learn, General and ocular history taking, Torch light examination, Slit lamp Biomicroscopy, Distance Ophthalmoscopy, Direct and Indirect Ophthalmoscopy, Patient counseling and Patient referral. This practice unit on low vision is intended for developing skills on Low vision history taking, Ocular examination, Low vison devices, Optical and non- optical devices and Low vision rehabilitation.

#### **Unit 5: Orthoptics- 45 Hours**

Students will be posted in Orthoptics room where they can learn, Assessment of EOM, Cover test, Measurement of convergence and accommodation, Measurement of Prism fusional ranges, Assess grades of binocular vision and Vision therapy. This practice unit on orthoptics is intended for developing skills on EOM, Cover test, Convergence, Accommodation, Stereopsis and Fusional vergence range.

#### **Evaluation**

Attendance and quality of participation	25%
Case reports (numbers and qualities)	30%
Clinical live skill demonstration: In all 3 given areas	45%

Total: 100%

## **Clinical Practice- II**

## (Hospital Based)

(Ocular procedures and Investigations, Ocular Anesthesia, Assist in Surgery, Preoperative Postoperative Management and Sterilization)

Total: 390 Theory: 0 hrs Practical: 390 hrs

### **Course Description**

Clinical Practice –II is a 390 hours (10 weeks/ 60 working days) hospital based program that aims to provide students an opportunity for meaningful career related experiences by working fulltime in real hospital settings where they can practice on ocular anesthesia and manage preoperative/ post operative patients of ocular surgery. Students can also expand upon their classroom based knowledge and skills before graduating by assisting in the different ocular surgery. At the end of this practical session students will be demonstrate preparation processing setting and autoclaving different ocular surgery instruments, linen etc.

The student will be eligible for Clinical Practice-II only after the completion of all classes of the subjects included in the curriculum. Clinical Practice-II should be completed at least 2 weeks before the start of 3<sup>rd</sup> year final examination of CTEVT. The institute will make arrangement for Clinical Practice-II. The institute will inform the CTEVT at least one month prior to the Clinical Practice-II placement date along with plan, schedule, the name of the students and their corresponding Clinical Practice-II site.

#### **Activities**

#### 1. Ocular procedure (Ocular anesthesia)- 90 hrs

- 1.1 Topical anesthesia
  - Preparation of medicines and patient
  - Explain the procedure of anesthesia
  - Instillation of anesthetic drop/ointment
  - Management of complication Local anesthesia (50 cases)

#### 1.2 Retrobulbar anesthesia

- Preparation of medicines and patient
- Explain the procedure of retrobulbar anesthesia
- Administer the retrobulbur injection
- Management of complication

#### 1.3 Peribulbar anesthesia

- Preparation of medicines and patient
- Explain the procedure of peribulbar anesthesia

- Administer the peribulbar anesthesia
- Management of complication
- 1.4 Infiltrative anesthesia.
  - Preparation of medicines and patient
  - Explain the procedure of infiltrative anesthesia
  - Administer the infiltrative anesthesia
  - Management of complication
- 1.5 General Anesthesia
- 1.6 Introduction GA

Basic knowledge of different equipments

#### 2. Assist in the surgery- 200 hrs

- 2.1 Preparation yourself and patients
- 2.2 Preparation trolley
- 2.3 Arrange the instruments and consumables
- 2.4 Set up machine if required
- 2.5 Assist to Surgeon

#### Minimum number should be assist in various ocular surgeries:

- Cataract surgery (30 cases)
- Glaucoma Surgery (5 cases)
- Nasolacrimal duct passage surgery (10 cases)
- Squint surgery (5 cases)
- Keratoplsty (3 cases)
- Vitrectomy (3 cases)
- Retinal detachment (2 cases)
- Ptosis and reconstruction (2 cases)
- Orbitotomy (2 cases)
- Enucleation (2 cases)
- Evisceration /Exenteration (1 case)
- Excision biopsy (2 cases)
- Epilation (2 cases)
- Pterygium (5 cases)

#### 3. Pre- operative and post operative management- 60 hrs

- 3.1 Pre -operative management
  - Prepare patients according to surgical procedure
  - Explain the surgical procedure
  - Counseling the patients
  - Review the check list
  - Take legal consent
  - Pre-operative teaching
  - Physical preparation including parts of eye

#### 3.2 Post-operative management

- Safely received patient from OT
- Immediate recovery care to the patient
- Start medicine according to order
- Explain post-operative instruction
- Close observation of operation site
- Discharge patients

#### 4. Sterilization- 40 hrs

At the end of this practical session students will be demonstrate preparation processing setting and autoclaving different ocular surgery instruments, linen etc.

- preparation of instruments, linen, utilities
- processing of instruments
- setting instruments according to ocular surgeries
- Autoclaving the instruments (Steam/electric/gas)
- storage and delivery of sterile instruments

## **Evaluation**

Attendance and quality of participation	25%
Case reports (numbers and qualities)	30%
Clinical live skill demonstration: In any 3 given areas	45%

Total: 100%

## Clinical Practice –III

## (Community Based)

(Diagnosis and screening camp, surgical camp, school screening, and district/Community/primary eye care centers/ Hospital)

Total: 312 hrs Theory: 0 hrs Practical: 312 hrs

## **Course description**

Clinical Practice –III is a 312 hours (8 weeks/ 48 working days) community based program that aims to provide students an opportunity for meaningful career related experiences by working fulltime in real holistic approach. It deals with managing patient having eye problem in the eye centre and mobile community outreach program, including examination, investigation, counseling and explanation of treatment procedure.

The student will be eligible for Clinical Practice-III only after the completion of all classes of the subjects included in the curriculum. Clinical Practice-III should be completed at least 2 weeks before the start of 3<sup>rd</sup> year final examination of CTEVT. The institute will make arrangement for Clinical Practice-III. The institute will inform the CTEVT at least one month prior to the Clinical Practice-III placement date along with plan, schedule, the name of the students and their corresponding Clinical Practice-III site.

#### **Activities**

## Unit 1: Observe and perform the job with or without supervision in Outpatient Clinic: 72 hrs

- Registration and reporting
- Visual acuity test and Refraction
- Eye Examination and Treatment
- Procedure room
- Imparting Health Education
- Maintain Referral Procedure for further treatment

## Unit 2: Observe and perform the job under with or without supervision in Ocular investigations department: 40 hrs

- Intra-Ocular Pressure Measurement
- Lacrimal Syringing Test
- Corneal Flurescein strip test
- Schirmer Test
- Color Vision
- Ophthalmoscopy (Direct and Indirect)
- Biometry
- Visual field examination

• Ophthalmic Photography

#### Unit 3: Observe and perform other support service: 40 hrs

- Counseling
- Spectacle dispensing (edging, fitting)
- Pharmacy (Medical dispensing)
- Maintain Medical and non-medical supplies (Inventory and logistics Management)

## Unit 4: Observe and perform the job under supervision in various department of In-patient Department: 60 hrs

- Admission of patient
- Consent perform preparation
- Prepare patient for surgery
- Check required investigation and preoperative management
- Postoperative management
- Patient discharge
- Recording

## Unit 5: Observe and perform the job under supervision in various department of Operating Theatre: 60 hrs

- OT running and record keeping
- Receive the patient in OT and check the patient readiness for surgery
- Preoperative management in OT
- Local Anaesthesia (Topical and Injections)
- Assist unscrub and scrub (Sterile)
- Instrumentation and sterilization
- Operate OT equipment
- Perform extra ocular minor surgeries
- Pad and bandage
- Recovery of the patient
- Immediate postoperative management
- OT fumigation and preparation
- Maintain OT record and prepare periodical report

# Unit 6: Observe and perform the job under supervision in various management activities of Outreach Community Eye Program: 40 hrs

- Describe Supervision, Monitoring and Evaluation of community eye health program
- Instrument/Equipment Maintenance
- Meeting and Minutes with stakeholders
- Prepare periodic report of the activities
- Maintain Communication with community base organizations
- Maintain a safe and healthy environment

## DST (Diagnostic, Screening and treatment) Camps:

**Surgical Eye Camps:** 

School Children Screening Program:
District/Community/primary eye care centers:

## **Evaluation**

Attendance and quality of participation	25%
Case reports (numbers and qualities)	30%
Clinical live skill demonstration: In any 3 given areas	45%

**Total:** 100%